



U.S. Department
of Transportation

Urban Mass
Transportation
Administration

Employee Assistance Program for Transit Systems

September 1991



A Procedural Guide and Model Program

UMTA Technical Assistance Program



U.S. Department
of Transportation

**Urban Mass
Transportation
Administration**

The Administrator

400 Seventh St., S.W.
Washington, D.C. 20590

Dear Transit Colleague:

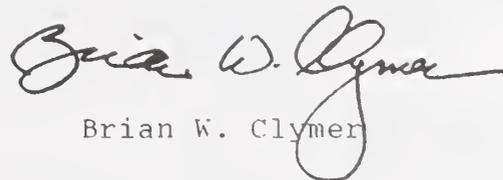
This manual is a product of the Urban Mass Transportation Administration's (UMTA) strong and long-standing commitment to human resources development within the public transit community. Effective and affordable Employee Assistance Programs (EAP) are available to transit operations of all sizes throughout the country. However, as the number and variety of EAP providers increases, transit managers need to become better informed consumers of EAP services. UMTA has supported the publication of this manual to help transit operators design, implement, and evaluate EAP's, based on the successful experience of Connecticut Transit and other systems.

EAP's can play an important role in several of UMTA's priority areas for human resources development. In particular, EAP's can help retain skilled employees, improve productivity and the quality of work life, and promote a drug and alcohol-free workplace. Helping individuals resolve problems that may affect job performance is critical in our uniquely safety-sensitive industry.

I am especially pleased that this manual reflects the input of several outstanding human resources professionals from throughout the transit community serving on a Technical Steering Committee. A vital part of UMTA's commitment to improving public transit management is documenting and disseminating successful techniques which others can use and tailor to local conditions. To that end, the Technical Steering Committee has been instrumental in ensuring that this manual will be readily usable by local transit decision-makers.

I earnestly hope this manual will prove to be a valuable tool for any transit system that is interested in establishing a new EAP or evaluating existing programs.

Sincerely,



Brian W. Clymer

EMPLOYEE ASSISTANCE PROGRAMS FOR TRANSIT SYSTEMS

a procedural guide and model

Final Report
September, 1991

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16. Abstract <p>This report is a detailed procedural manual intended to help primarily small and medium-sized transit systems design, implement, and evaluate Employee Assistance Programs (EAPs). Based on the experience of Connecticut Transit and other systems, the manual is intended to help local transit managers and decision-makers develop new programs or evaluate and improve existing EAPs.</p> <p>Specific topics addressed by the manual include alternative EAP models, reasons to justify EAPs on local transit systems, options in designing EAPs, implementation steps, program evaluation, case studies, and future issues and trends. The Appendix includes a glossary of relevant terms, sample EAP documents, an annotated bibliography, and an inventory of existing programs and contact persons at 180 United States and Canadian transit systems.</p> <p>EAPs help employees resolve any type of personal or family problems. EAPs provide supervisors with a positive referral for employees whose deteriorating job performance warrants intervention, as well as a confidential, low-cost source of help for individuals who access the program voluntarily. Effective and affordable EAPs are readily available; however, local transit managers need to become better informed consumers of EAP services as the number and variety of prospective providers increase.</p>			
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Throughout this project, a number of key human resources professionals representing transit systems throughout the United States served on a Technical Steering Committee. The Committee provided invaluable insight and guidance to the development of this manual and to ensure that its contents will be readily usable by local transit managers. The Steering Committee members are as follow:

- David A. Lee, Chair; Assistant General Manager for Transit Services, CTTRANSIT, Hartford, CT
- Genelle Wright Gibson, Director of Human Resources, Regional Transit Authority, New Orleans, LA
- Julie Hayes Johanson, Director of Human Resources, Metropolitan Transit Commission, Minneapolis, MN
- Elaine Kurtz, Assistant General Manager for Human Resources, Mass Transit Administration of Maryland, Baltimore, MD
- Robert O. Potts, Manager of Human Resources, Ann Arbor Transportation Authority, Ann Arbor, MI
- Celia Ussak, Director of Personnel, Metro-North Commuter Railroad, New York, NY.

In addition, two individuals served as corresponding members of the Steering Committee:

- Peter Drake, General Manager, South Coast Area Transit, Oxnard, CA
- Cynthia Gallo, Manager of Employee Counseling Services, Massachusetts Bay Transportation Authority, Boston, MA.

This project also received outstanding support from the American Public Transit Association (APTA) staff, especially in helping to conduct the inventory of existing programs which appears on page 99 of Appendix D and publicizing interim results. The authors especially wish to thank the late Melvin Howard, Robert Buchanan, Turner Spencer, and Russell Harris.

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Finally, the following staff of ETP, Inc. contributed to the development of this manual:

David Powell, Ph.D.; Donna Gold, RNC, CEAP; Laurie Trovato; Barbara Powell, MA; Lynn Markey, BA; Tricia Lareau; Nancy Fornier; Paul Crotty, MS, CEAP; Debra Barnicle, MSW, CAC; and Kevin Murphy, Ph.D., CEAP.

INTRODUCTION

This manual is intended for management personnel representing transit systems across the United States. Industry decision makers need to be informed consumers when it comes to Employee Assistance Program (EAP) choices. A common misconception is that only large companies can afford an EAP. Although the size of the transit system will impact on the program design, program components, decision points, and the distribution of tasks and functions, it is both possible and critical to have an EAP regardless of the size of the transit system. This manual provides the foundation for the selection, development, and implementation of an EAP that works.

EAPs are a form of "people maintenance". EAPs should be "broad brush" to address the variety of problems which effect employees. Since all personal problems, regardless of the type, can impact job performance in similar ways, an EAP approach that responds to the total range of concerns is needed. This manual provides the information necessary to achieve an effective broad brush program that helps employees resolve their problems and assists them in becoming more productive at work. Enhanced productivity, in turn, leads to cost savings for the company.

The intended readers of this manual are managers of transit systems across the country who may work in either public or private sector, small or medium-sized transit systems. This manual provides a clear description of the steps involved in developing an EAP and offers guidance on establishing a successful EAP in the transit system workplace. Transit systems with an EAP already in place will also find this manual beneficial for providing information helpful in evaluating their existing programs and offering suggestions, resources, and references to support the growth and enhancement of employee services.

Every work setting has its own demands. The transit workplace is characterized by long hours, rigid time schedules, and heavy exposure to the public. Workers bring to the job distinctive characteristics of their own to cope with these pressures. Employers need to know how to effectively respond to the problems of their employees, including how to plan and implement strategies that can support their workers.

UMTA, concerned about United States transit workers employed in settings that may lack the resources to develop Employee Assistance Programs, proposed this project. This manual provides information on EAP options for every transit system. This manual was made possible through a grant to Connecticut Transit under Section 6 of the Urban Mass Transportation Act of 1964.

SUMMARY

Three major uses are anticipated for the manual:

- 1) *For initiating an EAP.* In the past, EAPs were often considered too expensive for each transit system to have its own EAP. This manual provides an overview of helpful strategies for companies of all sizes to implement an EAP. This manual contains the information necessary for the reader to initiate a successful EAP.
- 2) *For refining or enhancing an existing workplace program for employees with personal problems.* Perhaps a present program which has traditionally focused on alcohol and drug abuse problems wants to broaden its service. Perhaps there is thought of formalizing the informal procedures currently in place. Perhaps training for supervisors is being considered. This manual will assist management personnel in making critical decisions related to program design.
- 3) *For evaluating an existing program to determine whether it addresses, in the most effective way, the special problems of troubled employees.* Many small and medium-sized transit systems may already be doing what is described in the manual. This manual demonstrates how to evaluate a program and helps identify areas for possible improvement.

CHAPTER ONE

What is an EAP?

WHAT IS AN EAP?

Employee Assistance Programs (EAPs) are designed to assist employees and their families with problems that may affect their well-being and their ability to perform their jobs. EAPs offer counseling services including assessment and referral, brief treatment, and follow-up services. EAPs offer assistance by helping employees to assess and identify problems arising from a variety of personal areas. EAPs assist employees by referring them to services which lead to solutions. EAPs provide training and consultation activities to management and union representatives. EAPs provide health promotion, prevention, and education programs to the general employee population.

GOALS AND OBJECTIVES

The primary goal of most EAPs is to maintain employees' ability to be fully productive on the job. EAPs help employees, management, and supervisors maintain a high level of productivity by providing services:

- To motivate individuals to seek professional assistance
- To help managers identify employees with job performance problems that may be related to personal problems and refer them to the EAP for professional help
- To assess employees with alcohol abuse, drug abuse, emotional, or

behavioral problems resulting in a pattern of deficient work performance

- To provide easily accessible, quality services which include short-term professional counseling assistance and referral
- To provide crisis intervention services to employees
- To direct employees toward the best possible assistance
- To provide follow-up assistance to support and guide employees through the resolution of their problems
- To act as an education and training resource (e.g., employee orientations, health promotion topics, management training regarding the troubled employee, etc.)
- To design and deliver promotional strategies to increase program visibility and utilization by employees

These objectives may best be met by a service provider who offers consultation, training, and short-term counseling services. The overall aim is to detect and intervene in problems affecting work productivity and to promote healthy work and lifestyle habits.

ASSESSMENT AND REFERRAL

An EAP assessment should be conducted by a skilled, trained professional counselor who

has experience in dealing with a wide range of "people problems".

It is the counselor's job to help people to sort things out, to identify problem areas and to decide what steps are needed to resolve their issues. This is often accomplished in one to three sessions. If additional services are needed, the counselor will help the employee to connect with those services and will make sure practical solutions are offered for the individual. Often, employees are in denial and do not realize the actual basis of their problems. The EAP can clarify the issues and assist employees in seeking appropriate help.

Many obstacles to receiving professional help are removed by the assessment and referral process. Assessment and referral services are free and confidential. Employees are not placed on a waiting list before they can receive help. EAP resources are available to employees and supervisors alike.

COMMON MISCONCEPTIONS ABOUT EAPS

- An EAP is *not* a means to get rid of an organization's "dead wood."
- An EAP is *not* a means of punishing employees who do not respond to supervisory directives.
- An EAP is *not* a waiver of management's responsibility to maintain discipline, nor of its right to take disciplinary measures.

- An EAP is *not* synonymous with Human Resources.
- An EAP is *not* a drug testing program.
- An EAP is *not* a form of protection or escape from work responsibilities.
- An EAP is *not* a means for the company to become involved in employees' private lives.
- An EAP does *not* contribute information to one's personnel file.
- An EAP is *not* solely for alcohol and drug abuse problems.
- An EAP is *not* a program forced on an employee.
- An EAP is *not* an additional expense to the employee.

HISTORICAL OVERVIEW OF EAPS

The EAP movement began in the 1940s as an effort to help employees to resolve problems on the job that were related to alcohol abuse. Occupational Alcoholism Programs (OAPs), forerunners of today's EAPs, were designed to help employees with their drinking problems. Companies like Eastman Kodak Corporation, North American Aviation, DuPont, and Consolidated Edison of New York launched successful OAPs to deal with alcoholism. Programs like these, that emphasized therapeutic approaches to alcoholism and alcoholism stigma, eventually were expanded to include a wider range of diagnostic problems.

Other companies, such as the Caterpillar Tractor Corporation, developed medically-directed programs to deal with a broad range of behavior problems, including emotional disturbances and alcohol-related problems. These early programs, with their broad mental health focus, were often inadequately staffed because the providers did not have sufficient knowledge of substance abuse or a basic understanding of workplace organization to meet the therapeutic needs of the substance abuse-related conditions they encountered. In addition, only a few of these programs hired psychiatrists as part-time consultants to advise and assist in the assessment and referral of mental health problems. Consequently, many of these programs failed because of inadequate and inconsistent staffing.

In contrast to the medically directed programs, OAPs were often staffed by recovering alcoholics who were also employees of the company. These individuals frequently possessed an understanding of the disease, were connected to Alcoholics Anonymous (AA), and were familiar with the few community resources designed to treat addicted people. Additionally, their understanding of the organization and its key players enhanced their ability to work effectively within the organization. Such programs were able to identify a significant number of cases and show a correlation to loss reduction.

The majority of these OAP counselors had little or no professional clinical training and they continued to focus primarily on assisting alcohol troubled employees. With the focus on this population, other troubled employees were largely ignored; at the same time, those using the program were labeled

"alcoholic." Because of this stigma, many employees avoided using the program until their problems were out of control. Alcoholics were often in the late stages of the disease, during which time they would have a greater chance of relapse and would more likely require repeated treatment interventions. In the process, they could lose their jobs because of the frequency of repeated job incidents.

Throughout the 1960s and 1970s, OAP proponents found that when they focused on job performance, they identified troubled employees before behavior like drinking on the job began to occur. They also found that a large percentage of job performance situations were connected with other personal problems. In 1965, a study by the National Council on Alcoholism (NCA) indicated that programs should focus on job performance rather than on alcoholism symptoms for the purpose of early identification of alcoholic employees. Prior to that time, supervisors were expected to watch for behavioral, social, and physical indications of alcohol abuse. Actions such as staggering, slurred speech, and unusual conduct signaled employees who were drinking on the job. Eventually, the emphasis shifted to focus on deteriorating job performance as a means for identifying employees needing help.

In the early 1970s, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) introduced the "broad brush" concept for industry and called these programs Employee Assistance Programs (EAPs). The focus was on job performance impairment resulting from a broad range of behavioral and medical problems. This shift was integral to the success of EAPs in the following decade. It relieved supervisors of

the need to identify and diagnose personal problems on the job and allowed them to focus on concrete measurements involving work productivity and other job-related areas in which they were already qualified. More importantly, it helped them spot troubled employees at an early stage, before their problems grew so serious that their jobs were threatened.

During this time, external consultants became involved in consultation, training, and service delivery. These consultants often worked jointly with in-house EAP providers to deliver a broad spectrum of services that were responsive to clients' needs. Local and national associations such as the Association of Labor-Management Administrators and Consultants on Alcoholism (ALMACA) were also initiated at this time to provide a forum for EAP providers to share their ideas.

During the 1980s, EAPs more fully recognized that most personal problems (i.e. substance abuse, mental health, familial, marital, legal, financial, etc.) manifest themselves similarly in terms of job performance problems (i.e. absenteeism, interpersonal tension, errors, accidents, decreased productivity, etc.). EAPs came to represent the increased understanding by employers of the impact that unresolved personal problems of all types can have on organizational performance.

Companies' focus on job performance indicators created new challenges for the EAP field, since *all* employees with job performance problems now had to be formally addressed. A wide variety of services were needed for these individuals. EAPs found it necessary to expand the types of services they offered, given that

employees came to them for help with a myriad of problems. The EAP field responded by opening its doors to other professional disciplines. This was not done to replace the expertise of the alcoholism specialist; rather, it was intended to enhance the EAP staff's ability to respond appropriately and effectively to the various mental health problems presented. This broad brush approach to EAPs has reduced the stigma of using an EAP and has enabled many more people to receive professional help for their problems.

Thus, companies eventually came to rely on trained professionals who were skilled and credentialed in counseling. Many EAPs are staffed by individuals with graduate degrees in psychology, clinical social work, marriage and family therapy, and substance abuse/addictions. In addition to advanced degrees, these clinicians often have several years of direct clinical experience. It is not unusual for EAP clinicians to have personal experience with addictions; knowing the recovery process first hand often gives them the wisdom and insight to reach troubled employees and family members. The professionalization of EAP service providers has enabled the EAP field to establish credibility and accountability for its accomplishments.

EAPs are becoming increasingly more sophisticated in the provision of clinical, management, and human services to their clients. While many EAPs continue to provide services only for alcohol and/or drug dependent employees, most EAPs provide a range of services including, but not limited to the following: assessment and referral, brief treatment, client follow-up, supervisor training, management consultation, education, prevention

activities, and statistical reporting to meet the diverse needs of the client company. Over the past fifty years, the EAP field has evolved into a comprehensive, service-oriented profession designed to address the situations that exist within today's workplace.

HOW IS THE EAP ACCESSED?

The EAP is a service intended to help employees resolve problems that can impair work performance. EAPs generally accept three types of referrals: self-referrals, supervisor referrals, and referrals by other concerned parties.

Self-Referral

Employees can seek the help of an EAP counselor themselves. Self-referrals occur more frequently as employees become more comfortable with their EAP. Self-referrals allow employees to receive completely confidential help.

In most programs, employees access the EAP by calling a toll-free number to arrange an in-person appointment with a local EAP counselor. A 24-hour telephone coverage system providing qualified counselor assistance for crisis situations should be included as part of an EAP. Confidentiality must be assured. The employee's first phone call can be used to obtain information about the program and/or to arrange an in-person interview with a counselor to discuss the problem and to explore sources of help. Employees are scheduled to see an EAP counselor up to the maximum number of sessions identified by program design. These sessions are provided free to

employees and their family members. If extended treatment is necessary, a referral to an appropriate resource is made. Employees are usually only responsible for fees not covered by their health benefits package. The EAP counselor will help the employees make the best use of the available benefit plan and assures the provision of the most appropriate and least expensive referral.

Family members can also directly access the EAP to get help for themselves. This type of self-referral may eventually involve the employee, as he or she is an integral part of the dynamic family system. Thus, it is important for troubled family members to receive assistance because their problems can impair an employee's functioning at work.

Supervisor Referral

An employee who is not meeting the work performance requirements of the job may be experiencing a personal problem. If a supervisor gives the employee feedback and recommendations about his or her work, but job performance remains unsatisfactory, the supervisor may suggest that the employee meet with the EAP counselor.

Employees have the option of refusing to use the program, in which case the supervisor should follow the usual procedures to address job performance impairment. The EAP should not be used as a weapon against poor job performance. Rather, the EAP is best positioned as a vehicle for employees to access help for personal problems. If an employee does not follow the supervisor's referral to the EAP, job performance will remain the primary

factor in determining the individual's employment status.

Referral by Other Concerned Parties

Sometimes other people seek advice about an employee or bring the employee to see the EAP counselor. This is called a referral by a concerned party.

Oftentimes, these individuals feel helpless and hopeless in trying to cope with the problems surrounding the troubled employee. By accessing the EAP, they become involved as part of the solution. They may be the sole link to EAP services for employees with intense denial of their problems.

MOTIVATION

With most personal problems, reasonable steps toward prevention are more beneficial than all of the available cures. To ignore a developing problem generally means that it will become worse. It is far less disruptive to an individual's personal life, family, and job to secure help before the individual has suffered damage to body, self-esteem, and reputation. When possible, it is better to motivate the person to seek help before a problem escalates out of control. It is an act of kindness and consideration to confront a person about a problem before the problem requires more effort to resolve.

An employee may be in "denial" and minimize the problems experienced and how they are interfering with life and work, and consequently deny the need for assistance. The EAP can be used by supervisors as a tool for addressing job performance

problems. A supervisor referral to the EAP may be helpful in getting past the employee's denial and helping to restore job performance. This is not to say that supervisors should be diagnosticians or detectives. The program relies upon the supervisor's ability to identify impaired performance and to discuss these issues in a clear, direct, and constructive manner.

The key to successfully motivating an employee to seek assistance is the fair and constructive use of the supervisor's own authority. The supervisor can motivate employees to get help by confronting a performance problem with documented facts, observations, and records. To make a skillful supervisor referral to the EAP, the supervisor needs to be trained through an EAP Supervisory Training Program in the following areas:

- observation of declining job performance
- documentation of specific instances of impaired performance
- preparation for a constructive confrontation with the employee
- confrontation of the employee regarding declining performance
- referral to the EAP
- follow-up on employee's job performance

Individuals who are highly motivated to solve their problems will often do so by themselves. There are, however, individuals unwilling to work on problems until the time when their jobs are threatened. If supervisors produce documentation of difficulties and the company's policies state that poor job performance will not be tolerated, employees will usually take

whatever steps are necessary to protect their job.

CONSEQUENCES OF IGNORING PROBLEMS

Some supervisors may decide they do not want to deal with employees who have personal problems. "Aren't there physicians and places in town that are supposed to help people with these things?" While there are many reputable agencies in the community that help people address their problems, there is still justification to implement an EAP for employees. Some of these reasons will be explored in the following section.

There are a number of circumstances in which employees do not use existing community resources. To begin with, employees may be unable to acknowledge that they have a problem. Even if they recognize that they have a problem, they often do not know where to go for help. Should an employee pick a name in the yellow pages? Does the employee need a doctor or a social worker? What will it cost? Sometimes agencies have waiting lists or are not staffed with professionals who are qualified to treat the specific type of problem the employee is experiencing. EAPs provide a solution to all of these obstacles.

Example: Tom's supervisor has grown tired of giving Tom "pep talks" about getting to work on time and remembering instructions about his job. Tom had always been a good worker, until his wife left him. His supervisor has since overheard the other employees teasing him about how he stays up late at night drinking beer and watching TV. Even though he has heard that Tom

smokes marijuana on the weekends, he believes that Tom would never do that at work. Still, Tom's supervisor decided that he had better "play it safe" and transfer him to the another crew where he "can't do much harm" and his late starts would cause less trouble. While this response may resolve immediate concerns about Tom's work, his personal problems remain unresolved.

Unfortunately, in this situation, both parties lose. Tom's supervisor loses a good worker to a lower skilled job, the company will probably need to invest money to train another employee to do Tom's former job, and Tom remains unhelped. By ignoring Tom's problems, the supervisor is enabling these problems to perpetuate. Ignoring employees' problems is not compassionate or considerate. Rather, helping employees to confront their problems is often the first step in resolving them.

Troubled employees do not simply "go away." Statistics show that supervisors are continually dealing with employees' personal problems in one form or another. It may be in the time spent convincing them to improve their work, in the pointless confrontations over confusing labor and management situations, in expensive medical benefit payments, or in the costs of absenteeism.

Other supervisors try to "take care of their own" by "counseling" their employees. A good "pep talk" will not help a person with substance abuse or other personal problems resolve their difficulties.

Some supervisors say "we just don't hire people with problems." However, supervisors cannot "screen out" all

potentially troubled employees. It is impossible to predict who will experience a future trauma or loss such as marital break-up or death of a family member, or who will become an alcoholic. Furthermore, to not hire potentially troubled people would be in violation of the Americans with Disabilities Act (ADA), since mental disorders are defined as disabilities. Statistics show that all segments of the population demonstrate all kinds of problems. There are limits to what good hiring practices can do. The fact is, anyone can develop a problem at various points in life, no matter how "right" the person is for the particular job.

The EAP can help with "minor" problems, too. EAPs are not just for major life crises. EAPs can, for example, help with relocation issues or child and elder care. EAPs increasingly address a variety of needs and problems. EAPs are more preventative in nature, including a variety of wellness components such as assisting with fitness opportunities, smoking cessation programs, weight control programs, and stress management.

SUMMARY

EAPs are designed to assist employees and their families in obtaining information, guidance, and counseling to help them handle their personal problems. Personal problems can affect a person's job performance if left unattended. The EAP is effective in securing the professional assistance employees need to resolve their problems. EAPs historically evolved from occupational programs in the 1940s to the "broad brush" approach popular today. Evidence suggests that broad brush EAP

intervention is needed for a wide range of employee concerns. For the employees, a 24-hour telephone line to the EAP staff allows for a confidential self-referral. Employees receive help easily without cost to them. Supervisors and other concerned parties may also refer employees to the program.

The EAP staff helps employees to:

- Assess and clarify their problems
- Develop a plan of action to resolve their problems
- Determine if continued professional assistance would help them to resolve their problems
- Assist the employees with referrals to quality, appropriate, services.

CHAPTER TWO

Why Have an EAP?

WHY HAVE AN EAP?

There are many reasons for instituting an EAP. UMTA has supported the development of this planning tool due to the positive track record EAPs have maintained in transit systems of all sizes across the country.

- Due to the sensitive nature of personal problems, many people avoid seeking professional help. The delay often causes minor problems to become major ones. The EAP offers free, confidential, accessible help to employees. Employees can receive professional assistance in the early stages of their problems.
- EAPs offer help to employees before their personal problems affect their job performance.
- Employees do not always have the information or experience to resolve their personal problems alone. The program is designed to help employees resolve their problems as quickly as possible. EAPs help employees sort through the array of available services and resources in the community.
- EAPs help supervisors to resolve problems that previously were ignored and may have resulted in the termination of employees. By providing supervisors with a positive referral source, a positive intervention can occur.
- EAPs make disciplinary policies credible by offering an effective response to job performance issues before further impairment occurs.
- EAPs provide a range of other services to employees and management including consultation, training, and education.
- EAPs provide an opportunity for preventative programming via educational programs, health promotion activities, wellness seminars, etc.
- Outcomes are more cost effective and employee recoveries are more successful in situations where a skilled EAP evaluation occurred first. EAPs offer a low cost source of help for individuals troubled by personal problems.
- EAPs also make referrals to appropriate, cost-effective resources, resulting in cost-savings for the company.

While EAPs are designed to assist troubled employees in dealing with personal problems, they have a much broader impact on a company's overall functioning. There are several severe potential ramifications when impaired performance is left unaddressed. Recruiting, hiring, and training costs are incurred when an employee is either temporarily or permanently replaced. Absenteeism and accidents on the job reduce productivity and

cost the company. Supervisory time dealing with the troubled employee and other affected employees costs the company. Medical expenses likewise add up and tax company resources.

The Exhibit on the following page outlines, in some detail, the workplace concerns that EAPs address. The loss of employees, absenteeism, medical costs, accidents on the job, and supervisory time spent dealing with troubled employees cost the company. Effective EAPs result in cost savings for the company. Employees are connected with appropriate services in a timely manner and eventually return to full productivity in the workforce.

COMPANY BENEFITS

A MacDonald Douglas study followed 20,000 employees over three years, many of whom were termed "non-impaired" and were used in the study to establish typical absentee, medical claims, and turnover patterns. EAP-directed employees were compared with the control group. The results of the study indicated there were very significant short and long term financial gains due to the EAP. It showed that the greatest benefits occurred in the year following initial diagnosis and treatment.

General Motors Corporation reported a two-to-one payoff for its EAP services. EAP Director Daniel Lanier said that the total number of people using the GM EAP increased steadily over the three year period while the total cost of benefits for substance abuse and mental health decreased by fifteen percent. At the same time, the cost of other nonEAP-related medical benefits rose.

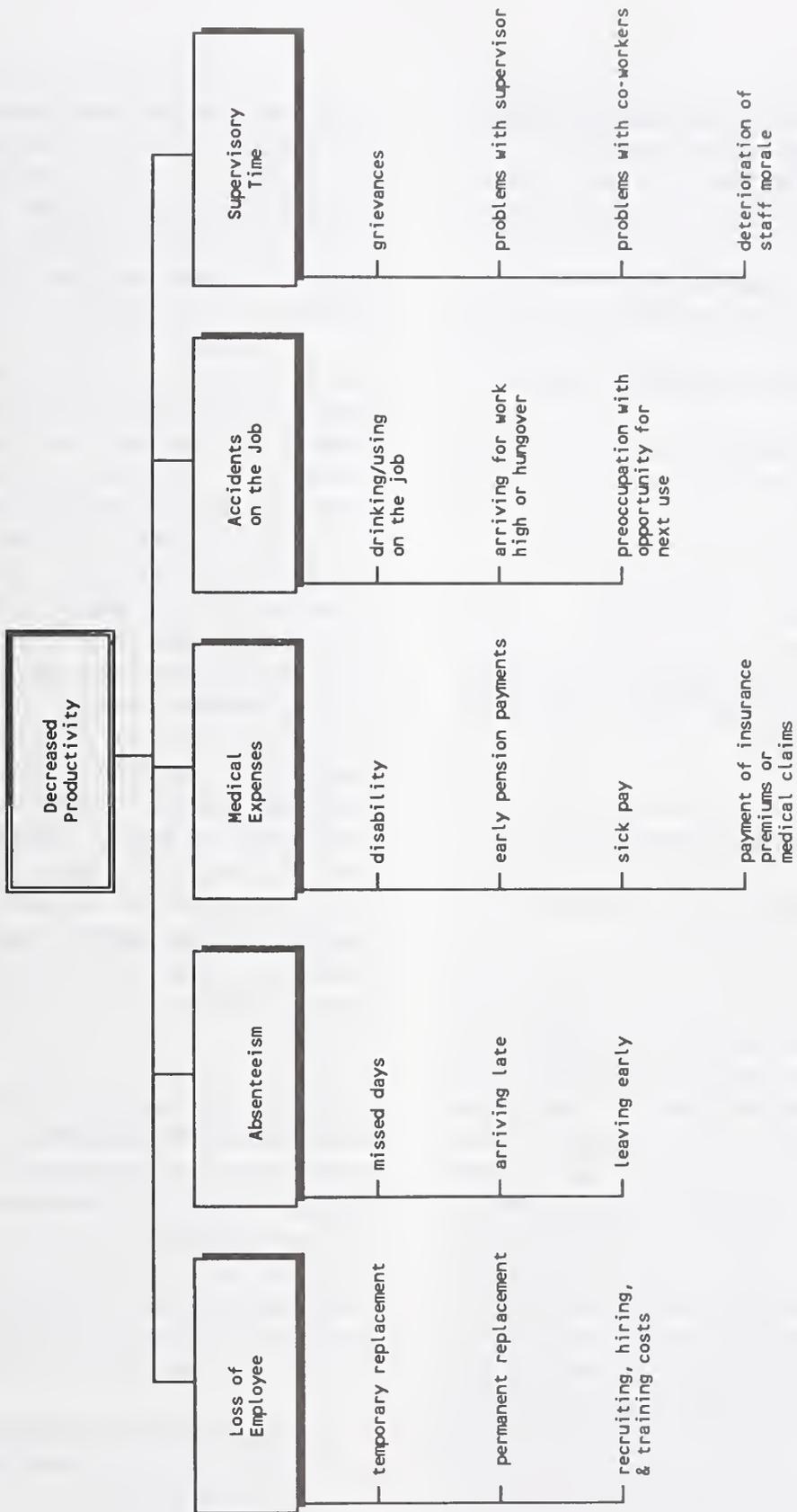
It is estimated that 25 percent of the troubled employee's worktime can be wasted on lost productivity and poor job performance. It is likely that the troubled employee will be absent three times more often than fellow employees, and that sickness and accident benefits will be paid at a rate that is three times higher than that of the national average. It is also estimated that 5 to 15 percent of the working population will experience personal problems that impair job performance.

Cost Savings for the Company

Investing in an EAP reduces costs. The field of Employee Assistance Programming abounds with literature attesting to the cost savings. (See the *Annotated Bibliography and Resource List* found on pages 124-141 of the Appendix.) It has been proven that replacing the troubled employee is more costly than rehabilitating that same employee. The U.S. Postal Service showed an annual savings of more than \$2 million through their broad brush EAP. The New York Telephone Company claims \$1.5 million savings and DuPont saw a return of a half-million dollars over its program costs. AT&T claims \$448,000 in actual and anticipated savings annually. The New York Transit Authority computed a savings of \$1 million per year paid in sick leave benefits alone.

When a troubled employee uses the EAP, job performance is improved. A recent review of evaluation studies indicates that over 70 percent of employees referred to EAPs for alcoholism were able to return to work and perform satisfactorily.

WORKPLACE CONCERNS WHICH
EAPS ADDRESS



A Comprehensive Approach to Drug Free Workplace

EAPs also can serve as part of a comprehensive approach to combat drug abuse in the workplace. EAPs can provide:

- comprehensive problem assessment
- referrals of employees for counseling or treatment
- case consultation with supervisors
- follow-up on cases referred
- education to employees about alcohol and other drugs that may affect job performance
- training for supervisors and other key employees to act as referral agents.

A Support to Supervisors

Some companies expect that good supervisors will have no problems in their departments, or that they will take care of problems themselves. Sometimes supervisors are afraid to talk to their managers about troubled employees because they do not want to make a "big deal" of the problem, to cause something negative to be put in the employee's personnel record, or worst of all, to be pressured to take adverse action. Some managers only want to hear positive things, leaving the supervisors feeling that it may be a negative reflection on them if one of the people they supervise is now a "problem". So supervisors ignore problems or make fruitless attempts at solving the problems themselves.

EAPs give supervisors a more viable option by supporting them in private consultation and suggesting they recommend that troubled employees use the EAP. A supervisor referral for confidential help, in turn, shows employees that they are valued members of the company.

The EAP provides valuable training and support to supervisors for dealing with troubled employees' job performance problems. Supervisor training teaches supervisors how to recognize and identify the typical signs of declining job performance. It trains supervisors to recognize their own feelings when dealing with troubled employees. It also teaches them to document job performance in specific, behavioral terms.

There are persistent and pervasive workplace needs which prompt the development of EAPs. These needs stem from the neglected, ignored, and often stigmatized behavioral-medical-emotional problems demonstrated by employees in the workplace. EAPs are an effective and humane response to these issues and challenges.

EMPLOYEE PROBLEMS

Partial Listing of Problem Areas in Which EAPs are Helpful

Today's employees deal with many types of problems. A sampling of the common problem areas addressed by EAPs include:

- marital and family problems
- psychological and emotional problems
- financial problems
- legal problems

- drinking and drug abuse
- gambling and other compulsive behaviors
- problems of aging
- abuse (child, spouse, elderly)
- eating disorders
- child care and eldercare
- career counseling
- stress and anxiety problems.

Employees come to work with a variety of problems. While there are several problem areas that frequently arise, it is not uncommon for individuals to experience multiple problems simultaneously. Real life difficulties are not neatly categorized and isolated from other life experiences. Although people often come to the EAP with an identified problem, it becomes clear in the initial interview with the EAP counselor that there are other problems as well. An individual may, for example, have an alcohol problem and be depressed because his wife is leaving him.

Personal problems make many people uncomfortable. Supervisors may avoid addressing job performance problems because they are afraid that doing so will mean they will also have to address their employees' personal problems. Troubled employees are usually good at hiding their problems, no matter how chaotic their home life is or how unhappy they are with their job. The material presented in this section will clarify the types of problems that an EAP can help, how these problems may become evident in the workplace, and how a well-designed EAP can help to resolve them.

Alcohol and Drug Abuse Problems

Alcohol is the leading drug of use and abuse in the United States. Alcohol depresses the central nervous system and is capable of producing psychological and physical dependency. Alcohol, when taken in small quantities, can induce feelings of well-being and sedation. It can lead to unconsciousness and even death when consumed in large amounts. These effects are similar to those produced by other sedative, hypnotic drugs such as barbiturates and narcotics.

Alcohol has been used throughout recorded history. Some people drink to relieve emotional pressure, to be sociable, out of curiosity, or they may just like the way liquor tastes. Some drink and cannot stop, characteristic of an illness known as alcoholism.

It is important, in this section, to define related terms for practical purposes. A "drug abuser" is anyone who uses a drug in amounts and frequency that negatively affects his or her physical condition, relationships, or ability to carry out responsibilities. This definition applies to legal, illegal, and physician prescribed substances. A "problem drinker" is anyone whose alcohol use has a negative affect on his or her life (relationships, physical condition, or job performance). Physically addicted problem drinkers are called "alcoholics". It is becoming increasingly common for the general public, as well as professionals, to use comprehensive terms such as "chemical dependency addictions," "chemical abuse," or "substance abuse" to refer to problem drinking and drug abuse.

Substance abusers usually deny that they have a problem. Often the problem develops so gradually that the person may not be aware that he or she is losing control. Because their tolerance for the drug has increased, alcoholics may be able to consume large quantities of alcohol without appearing to be drunk or out of control. The same is true for marijuana users, amphetamine abusers, etc. Nevertheless, there can be physical and psychological dependence and damage to the brain and central nervous system. Other problems may surface involving one's emotional, family, work, and social life.

Substance abusers frequently establish relationships with people who enable them to keep using drugs or alcohol. Substance abuse adversely affects the work environment; it can have a negative impact on absenteeism, productivity, health and accident claims, morale of other workers, and employee turnover. For instance, studies have indicated that problem drinkers have five times as many absences as the average employee. Such problems result in increased costs to management and inconsistency of overall job performance.

Emotional Problems

There are many terms describing patterns of problematic behavior related to psychological functioning, but the terms used most frequently by EAPs are "emotional problems" or "problems in living". Some of the basic elements of emotional problems include anxiety, depression, feelings of low self-worth, poor self-concept, phobias and unrealistic fears, and problems with mood or thought processes (including delusions and

hallucinations). Emotional and psychological problems can lead to a wide variety of physical illnesses as well.

Everyone is affected, at various points in life, with emotional crises: a death in the family, personal tragedies, depressions, fears, life conflicts, etc. For the most part, people deal with these problems over time and eventually resolve them. However, problems can become overwhelming. Professional assistance may be necessary to resolve many of these problems.

EAPs can help people with emotional problems by making it acceptable for them to talk about their problems. EAPs also facilitate their connecting with direct services to resolve the problems. EAPs deal with a broad range of emotional and psychiatric issues such as suicide, depression, inappropriate behaviors at work, persistent fears, life adjustment problems, self-image problems, etc.

A common misconception is that a person with emotional problems is severely ill or "crazy." The EAP works to dispel this misconception through education and training. Personal problems are normal life issues that people face. People sometimes need help to deal with these issues when they feel overwhelmed. The EAP is there to help.

Marital and Family Problems

National EAP statistics show that family and marital problems constitute a major problem category seen by EAP counselors. This should not be surprising, since nearly half of all marriages end in divorce. Relationships change over time. Children are born and

raised, a process which may bring with it a whole range of emotional and family stressors. In childrearing, families are confronted with developmental issues for their children. Children are confronted with the death of their parents. People may want and need help from a professional in sorting out these issues and life crises.

When there are tensions and problems at home, even for short periods, they can have an adverse effect on job performance. Divorce and broken homes, violence in the family, child abuse and neglect, or families troubled with chronic illness, death, financial crisis or substance abuse are all situations likely to displace reactions from home to the workplace.

It has been jokingly said that 95 percent of all families eventually have some problems, while the other 5 percent are in denial. It is acceptable to have problems in families. It is also acceptable to need help in dealing with these problems. That is where EAPs come in. An EAP counselor can meet with the family to assess the situation, identify the problems, and offer an intervention to resolution. This may involve family counseling, marriage counseling, parent/child counseling, or individual counseling.

Financial Problems

Most people admit they need more money. There is a difference between wishing there was more money and suffering a severe financial crisis.

Financial disaster can strike suddenly due to large medical bills or to something unexpected like property damage caused by

disaster. However, most financial problems tend to develop over time and are often tied with a misuse of credit. People frequently go deeper and deeper into debt, not realizing the range of alternatives available to them. Consequently, they do not seek help early enough.

Broad brush EAPs can help in this area by referring employees for budget counseling, legal advice and/or debt management education programs.

Legal Problems

EAPs can help an individual navigate the difficult waters of a confusing and complex legal system. Individuals often lack the information they need to decide when to get legal help and where to get it. They may be hesitant and apprehensive about accessing the legal system.

A variety of different legal problems can bring an employee to an EAP. They might include divorce, tenant/landlord or housing problems, auto or accident related issues, matters related to death or probate, or difficulty with an agency or business. Legal problems can disrupt a person's life financially, emotionally, and professionally.

Some employment settings offer prepaid legal services that fit into the EAP through a group plan. EAPs are also familiar with free or discounted reputable legal evaluation services and refer employees to them.

SUMMARY

There are many reasons to have an EAP. The first EAPs were motivated, to a great extent, by economic concerns. Later EAPs proved their value through cost benefit analysis and cost effectiveness studies.

EAPs provide an important, humanistic model of management. Employees who feel their company has a real concern for their welfare will be more loyal and committed to their work. Companies offering a range of services to help troubled employees with personal problems that affect their work will receive improved productivity in return.

CHAPTER THREE

What Are the Options in EAPs?

WHAT ARE THE OPTIONS IN EAPS?

EAPs focus on assisting employees and their dependents in finding help for personal problems. While there may be variations in the program design and model, the core purpose and standards are the same. All EAPs offer assistance to troubled employees for problems that affect their health and ultimately their job performance. Regardless of the type of personal problem, all problems eventually manifest themselves at work. When not addressed, they cause tardiness, absenteeism, decreased work productivity, poor communication, increased tension, interpersonal conflicts on the job, higher incidence of workplace accidents, medical problems, and other related health issues.

Choosing among the variety of available EAP models and services can be confusing when one first considers designing a program. However, EAPs are typically similar in philosophy and operation. Most have the following characteristics in common.

Broad Brush Approach - Most EAPs are designed to address numerous employee problem areas, including alcohol and drug abuse. The advantages to this broad brush approach include: supervisors focus on job performance; all problems affecting job performance can be addressed; and chemical dependency problems can be identified early in the disease's progression.

Company Support - EAPs are a prepaid benefit provided by the company's management, labor, or both. Regardless

of the model selected, the company's support of the program is manifested by its funding of EAP services made available at no cost to its employees.

Focus on the Workplace - All EAPs focus on the workplace. When troubled employees receive confidential, supportive services provided by an employer who is committed to retaining them, a workplace intervention strategy exists. The focus is on job performance, not symptomatology. On-site delivery of EAP services, including employee orientation and supervisor training, is an important aspect as well.

Collaborative Partnership - EAPs need the support of all levels of management and labor to form an effective collaborative partnership. Effective EAPs bridge the gap between the provider, unions, management, and labor.

EAP MODELS

There are three basic EAP models. The following overview briefly describes them.

In-House/Internal Model

In this model, the EAP is operated within the company as part of human resources, medical, or other departments. The personnel providing assistance are employed by the company. The company directly supervises the EAP personnel and determines the policies, procedures, and design of the program.

An internal EAP is typically housed in the company, but may be located in an office away from the worksite.

Out-of-House/External Model

In this model, services are delivered by a contracted external organization. While some companies may determine their own policies and procedures, others contract with EAP vendors to make recommendations regarding policies and procedures. An external vendor provides EAP services in its own offices, the company's offices, or a combination of both.

Consortium Model

In this model, several companies pool their resources to develop a joint program that maximizes capabilities. Generally, this model works for small to medium-sized companies and can be provided on-site or in various office locations.

As discussed below, each model has several critical advantages and disadvantages that companies must consider.

Internal Model

An internal EAP is staffed by qualified personnel promoted from within the company or hired from the outside specifically to run the EAP. Internal staff typically have a committed allegiance to the company to conduct the most effective program possible. Internal programs provide EAP professionals with the opportunity to become familiar with the formal and informal management and political systems of the company. Their familiarity with these systems enables them

to function more effectively within the company.

Internal EAP staff are able to maintain ongoing personal contact with supervisors and employees and are, therefore, frequently aware of the specific job-related stressors affecting employees. They may also inspire employee confidence in the EAP since they are a visible part of the company familiar with the specific problems inherent to the workplace. As an employee of the company and a member of the management team, the EAP professional is also in a unique position to witness the company's problems from the "inside" and relay them to management. Consequently, the EAP can often intervene in troublesome situations before a crisis occurs.

When it is necessary to obtain background information or the disciplinary history of an employee, internal providers have access to personnel records, performance evaluations, and other documents pertinent to case management. As a member of the personnel department, the EAP professional can protect confidentiality by not revealing employee names when accessing employee files.

Another advantage of the internal model results from the EAP's ability to work within the system to assess, modify, and improve the program. When recommendations are made, it is easier to attach additional tasks related to the EAP to an internal provider than an external one. An internal EAP provider can also recommend changes and implement additional activities by using the services of various departments, while similar changes in an external program may require contract negotiation.

The major disadvantages of internal programs also derive from the fact that the EAP is part of the system. Because the EAP is housed within the company and is staffed by member(s) of management, some employees may feel that the program is not sufficiently confidential and that use of the program may jeopardize their jobs. However, as with any EAP model, the perception of confidentiality depends on the level of trust within the company and the EAP's adherence to the highest standards of confidentiality.

Another disadvantage of the internal model involves the hierarchical position of the EAP professional. Most internal EAP staff are at the manager level. Will senior level employees be referred for help or voluntarily seek assistance from someone of a lower professional status? Likewise, when the EAP professional has collateral duties such as company nurse or personnel staff, employees may hesitate to seek assistance from them because their other job functions might jeopardize confidentiality. Additionally, EAP positions often lack upward mobility potential and are not career-enhancing positions.

There are cost-related disadvantages to internal programs. The salary and benefit costs of hiring a counselor might be high, especially during program implementation. Private, soundproof office facilities equipped with an answering service would be needed. A confidential, toll-free telephone line would also need to be staffed seven days per week.

Companies would likewise need to determine staffing needs according to the services to be offered. A full-time counselor is usually justified when serving approximately 5,000 employees with a three

session assessment and referral model. When additional services are offered and/or the EAP offers brief treatment, a full-time counselor is justified for approximately 3,500 employees. Fewer employees would require the coordination of a part-time EAP position.

In either case, counselor availability may, at times, be a concern. Likewise, it is difficult for one counselor to have the necessary clinical expertise across many problem areas and to know the broad range of community referral resources necessary for comprehensive service delivery.

External Model

Convenience and cost savings are major advantages that external models can provide to small and medium-size transit companies that do not have the resources for an internal EAP. Companies contracting for EAP services with external providers should approach them with specific criteria: education and certification requirements, EAP experience, familiarity with insurance coverage and services covered under these policies, knowledge of local referral resources, 24-hour coverage, emergency availability, etc. These issues will be discussed further in Chapter Four.

External programs typically have the staff capability to assess a wide range of employee problems and to refer to appropriate problem specialists in the community. External programs can also ensure 24-hour, 7-day telephone coverage and crisis intervention services. EAP vendors are generally not distracted with collateral duties within the company, better ensuring that EAP related services will be

delivered. If the company is dissatisfied with the services of the EAP provider, it can opt not to renew the contract or to cancel the contract. This process is simpler than terminating an internal EAP provider.

While costs vary among EAP providers, external EAPs tend to be less expensive than internal programs. Usually the fees of external programs are based on a per capita rate or on a fee-for-service rate. In addition, the company is not responsible for the added cost of providing counselor benefits, which range from 20-40 percent of a full-time employee's salary. Contracting with an EAP providers also allows the company to acquire EAP expertise without being concerned about supervising the EAP staff.

External EAPs often use off-site offices, thereby reassuring employees of the program's confidentiality. However, external EAP vendors may have less personal contact with employees, and therefore less visibility in the company. If employees view the EAP as an impersonal outside group, they may not disclose vital information or even access the EAP for help. Thus, the EAP staff must visit the various work sites and establish personal relationships with employees. Trainings, health promotion activities, and general contact with employees will establish visibility for the program.

Some companies utilizing an external EAP opt for a full service program. A full service EAP provides assessment, referral, follow-up, training, consultation, program promotion, and program evaluation. A thorough outline of program features can be found in the Exhibit on the following page.

Needs assessments are conducted prior to program implementation and periodically throughout each year to determine appropriate program strategies. Promotional activities including paycheck stuffers, posters, and videos often are used to introduce employees to the EAP and to increase program visibility. Employee orientation sessions serve a similar function. Supervisor trainings orient supervisors to their role in referring employees with job performance problems to the EAP. Many EAPs offer consultation services to managers, including Drug-Free Workplace training and consultation. Several provide a critical incident response to companies in emergency situations including debriefing, group sessions, and brief treatment. Many companies also include a health promotion component in their EAP. The above activities usually involve additional costs to the company.

Some companies contract for limited EAP services in a "cafeteria style" plan. They often contract solely for a 1-800 telephone assessment and referral service. Some choose not to include training, employee orientation, or promotional activities as part of the EAP. Other companies limit their EAP exclusively to substance abuse problems only. Supervisory training and consultation may be limited. Such programs opt for limited services to minimize EAP utilization. Limited EAP services may be the only viable option for financially troubled companies.

Preferred provider programs are emerging as another alternative to the traditional external EAP model. In preferred provider programs, EAP services are discounted or provided free as a way of increasing referrals to the provider. Preferred

IMPORTANT FEATURES WHEN CONSIDERING EAP MODELS

FEATURES	COMPREHENSIVE OPTION
PROGRAM DEVELOPMENT	<ul style="list-style-type: none"> - Needs Assessment - Program Design - Policies and Procedures Development - Union Integration - Start-up Meetings with Key Personnel and Advisory Committee
EAP PROMOTION	<ul style="list-style-type: none"> - Annual Face-to-Face Employee Orientations (or Video) - Wellness Seminars - Posters - Paycheck Stuffers and Wallet Cards - Personalized EAP Brochure
CLINICAL SERVICES * <i>* includes immediate family</i>	<ul style="list-style-type: none"> - Face-to-Face Assessment, Counseling, and Referral Services - 24-Hour Response - Appointments Within 48 Hours - Telephone and Face-to-Face Follow-up for a minimum of 3 Months until Problem Resolution
SUPERVISOR AND MANAGER TRAINING	<ul style="list-style-type: none"> - Training Programs (2 1/2 Hours each) - Periodic Updates for New Managers and Supervisors - Supervisor's Guide
CONSULTATION	<ul style="list-style-type: none"> - Consultation with Key Managers as Needed - Unlimited Telephone Consultation and Assistance to Individual Supervisors as Needed
REPORTS AND EVALUATION	<ul style="list-style-type: none"> - Quarterly Reports Analyzing Performance (Statistical Summaries and Narrative Reports with Recommendations) - Semi-Annual Presentations to Senior Management
FEE OPTIONS AVAILABLE	<ul style="list-style-type: none"> - Per Capita Fee - Sliding Scale based on Utilization - Administrative Fee/Per Case Basis
OTHER SERVICES AND FEATURES AVAILABLE	<ul style="list-style-type: none"> - Critical Incident Response - Executive Assistance Program - Drug-Free Workplace Training and Consultation - Workplace Seminar Series

Because every company's needs are unique, each Employee Assistance Program option allows for complete flexibility in program design and delivery. Each option is also structured to be easily integrated with other existing benefit programs.

providers give company employees free EAP evaluations and low-cost health screening services as part of the preferred provider package. Employees are then referred to the provider's inpatient and/or outpatient services which are then billed to the employee's insurance. In the process, such providers are expected to address issues of cost-effectiveness and cost-benefit. However, there is some risk that such providers will refer employees to their own programs rather than to other more appropriate, cost-effective services elsewhere.

Regardless of the program specifics, external EAPs provide more program evaluation and quality assurance than internal EAPs. Since external contractors often provide services for a number of companies, they have a larger data base with which to compare programs and monitor program effectiveness. Increased competition among external EAPs has provided the impetus for more EAPs to conduct accurate evaluation of programs.

A potential disadvantage of the external models could result if EAP vendors used a single approach for serving all companies rather than assessing the particular needs of an individual company. To provide customized service, EAP providers must become familiar with each particular company: corporate characteristics, technical aspects, and particular stressors in the workplace. This would entail extended contact with employees and supervisors, often at additional cost to the company.

With any external model, the company would not have access to the EAP's client records. Instead, it would receive general demographic information, thereby limiting

program evaluation and follow-up on job performance.

Consortium Model

A consortium EAP is operated by subscribing companies who share the costs and the benefits of the EAP. Frequently, small to medium-sized companies band together to hire services from an EAP vendor. The consortium is governed collectively by the member organizations and assumes full responsibility for determining the specific EAP services offered. Affordable, confidential, full-service programs with high referral rates typically characterize consortium programs. Because of the cooperative nature of the consortium, one agency usually serves as the consortium contracting agent for all the participating agencies to facilitate the administrative logistics of the program.

Member organizations typically agree on a per capita rate and offer training and education programs from one of several convenient locations. One drawback to the consortium model arises from the often complicated administrative details of shared costs by member organizations. Another major disadvantage involves providing comprehensive coverage to a multiplicity of locations.

PROGRAM ENHANCEMENTS

In addition to these three primary models, program enhancements can be provided to compliment the basic EAP services. Program enhancements might include health promotion activities, drug testing components, critical incident response,

executive assistance programs, workplace seminars, and consultation.

Health Promotion Activities

Health promotion or "wellness" programs began in the 1970s and 1980s. In recent years, EAPs have been designed to deal with health promotion and wellness. Activities include, but are not limited to, stress management training, smoking cessation classes, weight reduction programs, mammogram screening, and blood pressure screening. The purpose of these activities is to facilitate employees' adoption of personal behavior that will enhance their health, fitness, and wellness. This is expected to reduce health risks that are costly to the employee and the employer. A parallel goal is to improve the general well-being of employees, and thereby enhance their job performance.

However, programs often have difficulty getting people most in need of health promotion activities to access these services. These activities can be offered on or off-site by internal or external providers. Many EAPs include wellness strategies in their programs. When combining the two, it is important that both approaches, EAP intervention and health promotion, be presented as a continuum of activities designed to enhance the overall well-being of employees.

The "Live for Life" EAP operated by the Johnson & Johnson Corporation is a good example of the way health promotion activities and EAP services can be provided in tandem. The Johnson & Johnson EAP offers employees and family members confidential, professional assistance for

problems that may be alcohol related, marital, emotional, family oriented, or any other mental health concerns which could adversely affect them. By offering health promotion activities, the EAP also serves employees who are in good health.

Drug Testing Program

Drug testing is a "safety sensitive" issue for transit systems. The safety and well-being of the public is of paramount concern to transit companies. Drug testing usually involves three objectives:

- to detect individuals in violation of drug-free workplace rules
- to deter violations
- to fulfill the expectations of public authorities that transit managers are making every possible effort to ensure safety in operations.

In order to achieve safe operations, all transit systems have policies indicating that employees should not report to work with alcohol or drugs in their bodies, possess or use such substances on the job, or be impaired by or under the influence of alcohol or other drugs at work. All EAPs provide employees with an opportunity to obtain counseling and medical treatment to help them resolve their substance abuse problem. Some EAPs help companies formulate their substance abuse policies and drug testing procedures. Usually when an employee tests positively for drug use, a supervisor referral is made to the EAP. The EAP then acts according to the specific drug testing policy of the company.

It is important to note that associating an EAP too closely with drug testing can

undermine the broad brush function of the program. For that reason, EAPs' roles in drug testing are often limited to helping people before they get caught and to providing follow-up to individuals who test positive and are permitted to return to work following rehabilitation.

Critical Incident Response

At times every workplace may be exposed to a traumatic event. The occurrence of such incidents is, in fact, on the increase in our society and can seriously affect worker productivity and health if not well managed by an employer. These incidents may range from an employee having a heart attack or serious accident on the job to violence or suicide. EAPs often provide assistance in these crisis situations and will work with groups and individuals to resolve related issues as they arise. Some EAPs provide teams of professionals skilled in dealing with critical incidents to respond quickly to the needs of employees.

Executive Assistance Program

High level managers and executives are not immune to personal problems. Often the isolation and insulation of the executive suite, when combined with other pressures, take their toll. Many EAPs provide special, confidential, individual counseling and organizational system counseling services geared to executives as another aspect of their program. These executive assistance programs are staffed by professionals who are likely themselves to be executives of a company and have experience treating executives.

Workplace Seminars

EAPs provide a wide range of training programs to address substance abuse, family and parenting issues, corporate values, health concerns, and interpersonal concerns. These seminars may be held at lunchtime, during breaks, or after hours. Many are topically focused on key issues and concerns of employees. They are led by EAP staff or outside professionals and are voluntary for anyone interested in attending.

Consultation Services

Many EAPs offer additional consultation services to companies. This may include technical assistance in developing substance abuse policy and procedures, in improving staff morale and communications, or in the design and delivery of prevention program strategies. EAPs offer valuable experience, resources, and capabilities to support companies.

EAP INTERFACE WITH INSURANCE

EAP services are offered as a prepaid, company benefit to employees and often their family members. When an EAP client participates in treatment beyond the authorized EAP services (assessment, referral, and/or brief treatment), such treatment is routinely charged to the individual's insurance. Ideally, EAP professionals are knowledgeable about the specific coverage provided by employees' health insurance. They use this information to make appropriate referrals within employees' financial means. They are

familiar with how to verify coverage and explain that process to employees.

Increasingly, EAPs are being utilized as a gatekeeper for accessing employee benefits for mental health and substance abuse treatment. They are being asked to function as a screening mechanism by authorizing the use of insurance benefits. This role is extremely controversial. There is concern that an employee's freedom of choice regarding treatment is limited by such a tightly controlled system. Similarly, there are concerns about the objectivity of the EAP provider in selecting preferred treatment providers. Proponents of the system believe that this gatekeeper role maximizes the EAP professional's ability to be an advocate for the client by selecting and obtaining authorization for the appropriate treatment. Thus, the EAP must be able to intercede with an employee's insurer to get approval for necessary care. Otherwise, an employee has to breach confidentiality by going directly to the benefits administrator to get approval.

CONFIDENTIALITY AND ACCESSIBILITY

Confidentiality is a complex matter, almost always involving the balancing of the competing needs to disclose or not disclose personally identifiable information in particular situations. All EAPs have, as critical aspects, the need for strong confidentiality measures protected by sound policies and procedures. If strict standards are not maintained in these areas, the program cannot be effective. Employees must have confidence that no one will know they used the program and that the

information shared with the EAP will be kept strictly confidential.

The only time the EAP will disclose that an employee is involved with the program is when a confidential referral is made by the employee's supervisor due to work performance issues and the employee chooses to sign a release of information form. The only information the EAP can share with supervisors is whether the employee was seen by the EAP and if he or she is following the EAP's recommendations. This information is given only when the employee signs a release of information. (See the sample *EAP Consent for Release of Information Form* found on page 79 of the Appendix.)

Program credibility hinges, to a large extent, on the actual and the perceived adherence to the Federal confidentiality requirements and to the respect for individual privacy shown by the EAP. EAP records may be protected under Federal statutes if the EAP is Federally conducted, regulated, or assisted, either directly or indirectly. The EAP can provide each employee who uses the program with a confidentiality statement that reflects all Federal and State regulations which apply to records, discussions, and other information gathered in the context of the EAP. Federal regulations would prohibit disclosure or use of EAP records unless specifically permitted. The regulations permit:

- Disclosure if the employee consents in writing in accordance with detailed provisions of regulations
- Disclosure without patient consent if the disclosure is to medical personnel to meet any individual's bona fide

medical emergency or to qualified personnel for research, audit, or program evaluations (but qualified personnel may not disclose patient identifying information)

- Disclosure pursuant to a court order after the court has made a finding that "good cause" exists for purposes expressly set out in the regulations.

Federal confidentiality protections do not apply to certain communications:

- Reporting under State law of incidents of suspected child abuse and neglect
- Communications within a program (the EAP) or between a program and an entity having direct administrative control over the program
- Disclosures to law enforcement officers concerning a client's commission or threat to commit a crime at the EAP site or against EAP personnel.

While Federal regulations do not apply to all EAPs, their detailed provisions offer some insight into the possible considerations necessary to develop a meaningful confidentiality policy. Company policies and procedures must clarify EAP responsibilities and take into account any applicable law or labor agreement.

SUMMARY

Currently, there exists no predominant EAP model. However, most EAPs are broad brush in their overall approach. EAPs vary because employee and employer needs vary. EAPs are flexible; the various existing models offer companies a wide range of choices, and new models are emerging as this manual is being prepared. However, all EAPs share a common concept critical to program efficacy: EAP intervention is an effective way to assist employees when personal problems adversely affect work.

CHAPTER FOUR

Designing an EAP

DESIGNING AN EAP

The first step in designing an EAP is to determine the basic program requirements. There are three primary areas to consider when designing an EAP that is responsive to the company's particular needs.

Scope of the Program:

- Size of the employee population
- Employee eligibility (i.e. probationary employees, dependents)
- Number of company worksites
- Location of company worksites
- Types of employee problems to be addressed

Program Model:

- Internal Model
- External Model
- Consortium Model

Program Administration:

- EAP interface with other departments (i.e. personnel department, benefits department, unions, employee organizations)
- Resources, facilities, and staffing
- Program launching and promotion
- Education, training, and consulting services
- Program accountability (i.e. statistical reports, records)

PROGRAM ADVISORY COMMITTEE

To determine the program design, the company must identify its particular needs. A Program Advisory Committee may be helpful to begin this process. An EAP should function as an integral part of the overall management process of the transit system it serves. It should be designed to assure its integration into the structures and processes guiding the administration and management of the transit system. The EAP should provide for formal interaction of participating transit system representatives to address the impact of program and organizational change on the well-being of employees. This can best be facilitated through a Program Advisory Committee.

A Program Advisory Committee is usually composed of representatives from key divisions, including manager and employee members, to ensure the responsiveness of the EAP to the company's needs. Unions should be invited to participate since the design of the EAP should facilitate an interfacing of management, union, and employee populations.

Communication is often established with appropriate company services including human resources, occupational health and safety programs, equal opportunity programs, and other organizations involved in employee relations and policy development. The support and participation of such organizations should be part of EAP policy formulation and program development. Thus, the purpose of the

Program Advisory Committee is to develop, implement, and oversee the EAP.

The Program Advisory Committee should meet at least twice a year and be chaired by the transit system's EAP Coordinator. The EAP should elicit advice, support, information, financial commitments, and resources needed for program efficiency from the committee members. There should be agreement among the members about program emphasis, information needs, and operational policies and procedures. Likewise, the EAP should be incorporated into the policy and procedures of the company to reflect company support of the program and to ensure consistency with company policy.

The Program Advisory Committee is intended to keep key people informed and involved in the program. Members of the committee need to see the EAP as an asset to them. They need to understand the concepts of the program, how it impacts on the functioning of the company, and how it will save the company time and resources. Management will need to learn how the EAP will affect supervisor-employee relations. Human resource staff must determine how the EAP will interface with their functions.

Prior to the EAP's development, there may have been an informal contact such as a recovering employee (alcohol or drugs) or someone in the company that people considered a helping person (i.e. someone they trusted in the human resources department or the union) that employees already turned to with problems. It will be important to include such people in the process, so they do not feel that the program is causing them to lose anything. Human

resource staff may likewise fear that they will lose some of their important responsibilities. Managers may be afraid of getting too involved in employees' problems. To some people, employees with personal problems mean weakness and inferiority.

These fears are common and are usually solved with accurate information. To help turn these concerns into cooperation and support, the Program Advisory Committee gives people an opportunity to discuss their fears and to learn about the nature of the EAP. Presentations may help clarify the EAP concept. Data collected from other transit systems may demonstrate the potential benefits of the program. A company will be more likely to implement an EAP if there is a sound prediction of a successful outcome for both employees and management.

Several other resources are available to answer questions and provide relevant information:

- transit system leaders who have been involved in similar programs in the past
- someone who has done work with EAPs in accounting areas who can attest to the soundness of the cost estimates
- EAP professionals
- labor leaders who have had programs in their unions.

Input from these resources can facilitate the decision-making process in considering the development of an EAP. (Please see the

Inventory of Existing Programs found on pages 142-161 of the Appendix for a listing of other transit systems with EAPs.)

NEEDS ASSESSMENT

A needs assessment should be conducted at the onset of EAP development to identify issues particular to the company and to determine the specific program requirements. Once the program is operational, an EAP needs assessment should be conducted at least every other year by a qualified employee assistance professional. Additional assessments should be conducted when requested by management, when significant changes occur in the transit system, or when mandated by government regulations. An EAP needs assessment should identify worksite, environmental, programmatic, personnel, and stress related factors that are deleterious to employee well-being or productivity.

The needs assessment should include an organizational profile of the company's type and structure and a review of the company's current needs and status. (See the Exhibit on the following page for a listing of applicable issues to be addressed.) This information can best be obtained by a variety of methods: worksite evaluations, employee /supervisor/labor surveys, epidemiological studies, demographic analyses, and program reviews. The information gathered from the needs assessment should help the company to determine the scope of services and program design appropriate to its needs. (See the sample *Needs Assessment - Employee Opinion Survey* found on pages 80-81 of the Appendix.)

SELECTING A PROVIDER

Once the transit system has conducted a needs assessment, has selected a program model and other program specifications, and determines it wants to use an external or consortium EAP model, it develops a Request for Proposal (RFP). This RFP specifies, to varying degrees, the type of services sought by the company. It is sent to all possible bidders, giving them an opportunity to develop proposals.

There are several ways to identify possible EAP providers. Directories are available which list local and national EAP providers. The Employee Assistance Professionals Association, Inc. (EAPA, Inc.) publishes an annual directory which lists EAP providers nationwide. EAPA is located at 4601 N. Fairfax Drive, Suite 1001, Arlington, Virginia, 22207. The phone number is (703) 522-6272. Another directory developed for transit companies by this organization is included in the Appendix of this manual. For this directory, data was compiled from a survey of transit companies across the United States and a listing of their company size, EAP model, and EAP contact person is included. (See the *Inventory of Existing Programs* found on pages 142-161 of the Appendix.)

Informal networking, involving word-of-mouth recommendations from other transit systems or information from professional organizations who are familiar with the scope and quality of services, can also familiarize the company with names of local and national EAP providers. Companies can also contract with a private consultant with EAP expertise in transit systems to determine possible providers.

**NEEDS ASSESSMENT
Issues to be Addressed**

**Company
Type and Structure**

- Is it a private, state or federal company?
- What geographic areas does the transit system cover?
- What is the company's management structure?
- Is there a union?
- Who has the power to make a decision about getting a program in place?
- Who will pay for the program?
- How long would it take to identify issues particular to the company and to get a program approved and operational?

**Company
Current Needs and Status**

- What are the types and frequency of employee problems?
- What is happening now? What protocols currently exist for dealing with problems?
- What populations are potentially at risk?
- What are the company's statistics on employee absenteeism, turnover rates, and accidents?
- Do employees/supervisors/union or human resource representatives think there are troubled employees?
- Would people be receptive to an EAP?

Several formats can be used when writing an RFP. Some include very specific outlines regarding requested services, while others are more general descriptions of problems and invite bidders to make specific program proposals. The following outlines the major content areas for an RFP.

RFP Content Areas

Presentation of the Problem

- Total number of employees covered
- Number of supervisors
- Nature of employee-employer relations
- Degree of union involvement
- Internal company resources
- Current/past efforts at EAPs
- Annual accident rate
- Types and frequency of work-related incidents or accidents

Program Model/Options

- Internal/external/consortium model
- Broad Brush/Preferred Provider/Occupational Alcoholism Program
- 1-3 sessions for assessment and referral
- 1-8 sessions for brief treatment
- Provider gives recommendation

Who Will Be Covered/Options

- All employees
- All employees and their immediate families
- Full-time employees only
- Employees with job performance problems only
- Non-probationary employees

Program Advisor

- How EAP will be organized and governed
- Program Advisor responsibilities

See the four sample *RFPs* found on pages 82-100 of the Appendix.

Selection and Screening

As the number and variety of prospective EAP providers increases, transit companies opting for an external EAP model should become better educated consumers of EAP services. Although individual practitioners and clinicians are subject to state licensing or board certification, national standards for EAP firms have only recently been established, and compliance to these standards remains strictly voluntary. EAPs are offered by individual practitioners, mental health centers, hospitals, managed care organizations, rehabilitation centers, group psychiatric practices, private corporations (for profit and not for profit), etc. Moreover, EAP related services are frequently included as elements of management consulting, employee wellness, and drug testing programs.

Selecting an EAP provider requires great care and no less attention to qualifications and costs than selecting other professional service providers. Based upon the experience of CTTRANSIT and other transit systems, the following considerations are recommended for screening prospective firms and selecting an EAP provider.

Comprehensive Services

Clinical Services

An EAP should provide comprehensive, high quality clinical services, supervisory training, management consultation, and preventive health education/health promotion services appropriate to the needs of the company. An EAP must competently assess employees and help them return to their highest level of functioning on the job when alcohol, drug abuse, mental health problems and/or other circumstances negatively impact their work performance.

Services must include intake, assessment, short-term counseling, and crisis intervention. The EAP must have an established community referral network and coordinate its services with local resources where appropriate. These referral resources should be reviewed at least every two years. Several factors should be considered when reviewing referral resources: types and limitations of services offered, cost of service (including types of insurance accepted), location, hours of operation, philosophy of treatment, staff qualifications, and admission/intake procedures. The EAP should provide employees with the names of more than one practitioner or agency for referral. Documentation of relevant licensure, accreditation, and certification credentials on all community providers should be on file in the EAP.

Follow-up Services

Once an employee has been referred for treatment, EAPs must provide follow-up services. The EAP practitioner should meet

with the employee or call the employee to reassess the situation, evaluate progress, determine satisfaction, and make additional recommendations where appropriate. Aftercare monitoring is as important as the initial treatment.

Supervisor Consultation and Training

The EAP should provide consultation to supervisors on matters related to employees, work environments, and company development. Training and orientation programs for all supervisors should include:

- an orientation to the EAP, including a discussion of the role played by management in the promotion of the program
- annual supervisor training focused on the identification of troubled employees
- annual presentation on confrontation techniques and methods of referral to the EAP.

Health Promotion

Preventive health education/health promotion should be an ongoing part of the EAP. Informational programs should be offered to develop an awareness of alcoholism, drug abuse, emotional problems and health concerns which may adversely affect work performance. Effort should be made to use local, community resources and services for health promotion activities.

Emergency Services

Most EAPs provide a 24-hour telephone number for employees and family members to call. However, during off-hours, this number is usually covered by an answering service that forwards messages to a counselor on call. An important consideration is how quickly the EAP can respond to an emergency. For example, if an employee is in the supervisor's office and needs to be evaluated for treatment immediately, is there a counselor who can provide this service? It is important during the evaluation and selection process to be assured of the EAP's commitment to provide whatever help is needed at any hour of the day or night.

Policy and Procedures

The EAP must have written policies consistent with prevailing Federal requirements and regulations pertaining to alcoholism, drug abuse, mental health concerns and other employee problems that affect job performance. EAP services should be widely publicized to reflect these regulations and ensure that all employees are informed about the services available to them.

An EAP should have policies and procedures which assure the appropriateness, effectiveness, and efficiency of the program in meeting the needs of management and employees. This includes assurance of a case record system in compliance with Federal confidentiality regulations, guidelines for assessing or measuring the quality of care, and a regular review of program services.

Flexibility of Services

Effective EAPs are customized to serve the unique requirements of individual workplaces and workforces. Therefore, it is important to determine how flexible the EAP is willing to be in designing or tailoring training programs, promotional literature, and other elements to the unique requirements of the workplace.

For example, how flexible is the firm in providing supervisor training, employee orientation, and other programs within the cost of the basic EAP contract? Some firms use essentially the same prepared training program for all clients. Others will work closely with a company to identify needs and prepare specialized training and promotional materials.

When implementing an EAP, employee orientation and supervisor training are essential. How many on-site training sessions will be provided? Are EAP staff willing to train employees on all shifts? To attend union meetings? To ride buses and visit maintenance shops in order to experience first hand the working environment of transit employees? What types of promotional materials will the EAP firm provide as part of the contract (e.g., brochures, posters, paycheck stuffers, etc.)? What materials will the EAP firm provide at additional cost?

One further consideration involves the EAP's ability to provide services in languages other than English to meet the needs of different workforce populations. The EAP should provide promotional material, employee orientation, supervisor

trainings, and clinical services in the various languages of the employee population.

(See the sample *Planning Instrument for Developing an EAP* found on pages 101-102 of the Appendix. This diagram outlines the program development tasks involved in designing an EAP.)

PROGRAM ADMINISTRATION

References

Request that each prospective EAP provider submit the names and telephone numbers of people to be contacted for information about their firm's work with other companies. All references should be checked to ascertain the legitimacy of the EAP and determine client satisfaction. In some cases, large corporations have been listed as clients for whom the firm may have worked only on an incidental basis. Because EAP services are highly personalized, reviewing provider's recent experience with comparable clients is extremely important. The following are considerations to bear in mind when checking the references of prospective EAP firms.

1. Is the firm's client list current? Is the firm still listing clients it no longer serves? Is the firm listing clients to whom it provided a lesser range of services or different services from those being sought? Were the contact people listed appropriately?
2. Does the firm have experience in similar workplaces and/or with transit system employees? While it may be unrealistic to expect EAPs to have specific experience serving transit clients, they may have been providers for public service, manufacturing, and/or transportation-related businesses. For example, does the firm have experience with "blue collar" as opposed to mainly "white collar" employees? Does the firm have experience with employees in unionized companies?
3. How satisfied are clients with the EAP's performance? Have they renewed their EAP contracts? When? How often?
4. How do the services provided to other clients compare with those requested? Was the basic EAP model similar or different? What additional services were provided, such as staff training, publicity, employee orientation, etc.? What do other clients believe are the firm's principal strengths and weaknesses?
5. What help has been provided in terms of cost control recommendations?
6. What professional affiliations does the firm have? Does the firm adhere to the standards of the Employee Assistance Society of North America (EASNA) or a similar professional organization?
7. In addition to references offered by the prospective EAP firm, it may be helpful to contact the company physician, rehabilitation or treatment centers in the area, and/or the agency's insurance or managed care provider for recommendations. It may also be helpful to contact other employers in the area not listed as

clients to see how they went about selecting an EAP firm and why they selected particular firms.

Resumes

The qualifications and experience of the staff who will serve employees are at least as important, if not more so, as the EAP firm's corporate references. Request that each prospective firm submit curricula vitae, (i.e. professional resumes), for the contract coordinator and counselor(s) who will be working directly with employees, not just for the firm's principals.

Some EAPs will propose to subcontract with individual practitioners rather than dedicate specific staff to employees. These may be unsatisfactory arrangements because they jeopardize service consistency and counselor accountability. However, be certain to establish how counselors are selected and evaluated, and how individual cases will be assigned.

The EAP must assure that service providers are qualified to perform their clinical duties. Prospective providers should be screened and evaluated with respect to professional education, postgraduate training, experience, professional affiliations, and relevant state and/or national credentials. Counseling personnel ideally should be holders of addictions certification and remain current in their fields as evidenced by participation in continuing education programs.

In reviewing counselors' curricula vitae, note the breadth of actual counseling experience in areas such as inpatient chemical dependency treatment, outpatient counseling, family therapy, and work with

children and adolescents. Some practitioners bring a broad background of clinical experience to the EAP, while others may simply be attempting to supplement their income from a private practice in a particular specialty.

EAP practitioners often use initials following their names to denote educational background and professional certification. Some of the more prevalent degrees are listed below:

- M.D. denotes a medical doctor.
- Ph.D. denotes that the individual has been awarded a Doctorate, usually in psychology or a related field.
- M.A. or M.S. denotes that the individual has been awarded a Master's Degree, which should but may not necessarily be in psychology or another relevant field.
- A.C.S.W. indicates the Academy of Certified Social Work.
- M.S.W. denotes that the individual has received a Master's Degree in Social Work.
- M.Ed. denotes that the individual has a Master's Degree in Education.
- R.N.C. indicates a Certified Mental Health Registered Nurse.
- M.S.N. indicates a Master's Degree in Psychiatric or Mental Health Nursing.
- C.A.C. indicates a Certified Drug and Alcohol Counselor.

- C.E.A.P. indicates a Certified Employee Assistance Professional.

In addition, some EAP practitioners are subject to state licensing or board certification procedures. Counselors should be asked to provide information regarding their licensure/certification.

Quality Assurance

A comprehensive quality assurance program should be an integral part of the EAP. A program should review, on an ongoing basis, the quality, appropriateness, effectiveness, and efficiency of the services provided. An annual program evaluation should include at least two components: a record review/audit and a program review. The EAP should also participate in program review activities which are part of overall program management. More details about the evaluation process are provided in Chapter Five of this document.

Records

Individual client and general program records must be maintained by the EAP. The EAP policy and procedures manual should specify record retention policies, who may have access to records, which information will be released to whom, under what conditions, and what use, if any, can be made of records for purposes of research, evaluation, and reports. Client records maintained by the EAP should never become part of an employee's personnel file and must be available only to the counseling staff.

Client records must be kept in a strictly confidential manner in accordance with the confidentiality requirements of Public Law 93-282 and implementing Federal regulations of 42 CFR Part 21 as well as PL 93-579 (Privacy Act). Counselors must be thoroughly knowledgeable about these regulations and are bound by the restrictions of these confidentiality and privacy regulations.

Reports

Quarterly and annual reports and any evaluation or needs assessment reports should be provided to management. Additional reports may be required by the company.

Facility

The EAP office should be located on-site or within easy access to the work population. When the EAP is serving a dispersed employee population, the EAP should be located within a short commute of the company's worksite. The EAP must have a 7-days a week, 24-hour answering service which will connect callers to a counselor when an emergency is involved. The office space must be private to ensure confidentiality.

Policy and Procedures

A policy and procedures manual should fully describe all areas of program administration. The general philosophy of EAPs is based on several underlying assumptions that should be articulated in an EAP policy statement.

- Health, mental health, alcohol and other drug problems are conditions that affect job performance, employee health, and quality of life.
- If an organization can recognize and address these problems early, work performance will improve and medical and surgical costs will be reduced.
- A mentally and physically healthy employee is an organizational asset.
- Employees who experience alcohol or other drug problems, either personally, in their family, or by their coworkers, can be helped by the organization.

The EAP policy statement expresses the desire of top management and labor to achieve a healthy workforce, both for the wellbeing of the employees and the positive impact on productivity. (See the sample *EAP Policy and Procedures* statement found on pages 103-104 of the Appendix.)

Several other elements are described in the policy statement:

- description of EAP services
- location and staff
- parameters of confidentiality
- policies regarding proper use, referral, return-to-work, and re-training
- management/union responsibilities
- emergency services
- EAP staff responsibilities
- adherence to all relevant Federal requirements

When EAP services are provided under contract or off-site, the written contract should clearly state the parameters of services and the liability obligation.

HOW MUCH TO PAY?

The pricing of EAPs is a complex task. In any given situation, one or another program model will be less or more expensive depending on a number of variables. Due to the direct correlation between program pricing and the program features to be offered, it is very important that a clear identification of the program elements desired has been developed and prioritized before costs of different service providers are compared. This assures that comparisons are equitable and accurate.

Some of the program design areas to be determined are:

- desired office location
- program focus
- service delivery pattern
- target population
- program staff
- program objectives
- program promotion
- degree of program evaluation and follow-up
- amount of training needed
- which program enhancements are needed.

Once the program model is identified, costs can be equitably compared. One of the positive aspects about issuing an RFP is that it helps assure that bidders are responding with programmatic and financial proposals that are based on similar criteria.

Internal EAP Pricing

With an internal program, the employer assumes all EAP expenses such as staff salary and benefits, employee promotional materials, supervisory training, films, clerical and computer support for the EAP staff, office overhead, staff training, and travel expenses. In an internal program, salaries and general operating expenses normally increase slightly each year. While an internal model provides the company with budgetary authority and therefore greater control of the program, it is important to consider the cost-related limitations as well. When one person coordinates the program, services usually do not include 24-hour, 7-days a week coverage with the wide range of clinical expertise that an external program could offer.

External EAP Pricing

External models usually offer three main forms of pricing structures: 1) per capita, 2) fee for service, and 3) insurance paid provider arrangements.

Per Capita

Frequently, EAPs are priced on a per capita/per employee basis. Companies pay a set amount for every employee, whether they use the program or not, much like the pricing structure on insurance packages. Traditional pricing structures of this nature include program start-up, annual employee and supervisor training, program promotional activities, usually 1-3 assessment and referral sessions, and program evaluation and reporting systems.

With an external contractor model, a single contract agreement covers the entire range of services. The external contractor assumes responsibility for paying salaries and benefits and assures that sufficient operating funds are available to support the EAP services.

Prices may vary according to the services offered. Sometimes referred to as a "capitation fee," a full-service contract may range anywhere from \$12 to \$85 per employee per year. Most larger service centers fix their rate between \$25 and \$55. A capitation fee of \$35 for an organization of 2,000 employees, for example, will cost the company \$70,000 per year. Capitation pricing depends on what is included in the package as well as the location and number of employees. Companies must consider the two most cost-sensitive features of an external EAP:

- number of free counseling sessions
- amount of on-site staff time.

It is possible to start with a basic EAP assessment and referral model and, in time, enhance the EAP with other program components after employees understand the program and have confidence in its value. Most EAP providers are willing to come in, at no cost, and evaluate the company's needs. They will then offer options in a formal proposal so a desired and affordable program can be developed.

Direct Billing/Fee for Service

The direct billing or fee for service pricing method is another pricing strategy offered by some external contractors. Charges for services can be "billed" per EAP session or

hour; per case, regardless of number of sessions or hours provided; and per service or per program option, i.e., training, promotional activities, etc.

Provider Agreements

Some agencies and treatment centers offer free evaluations and charge on-going visits to insurance providers. These agencies and treatment centers often provide free assessment services in order to make referrals to their own programs, thereby enhancing their program utilization. This may compromise the quality of treatment received by the employee. In addition, this often results in rising company medical and insurance costs, and actually discourages some employees because they cannot pay the deductible and co-payment costs.

Co-pay EAP programs have been used in some settings, but again, can offer a financial barrier to follow-through for employees.

The EAP marketplace has recently become more competitive. Most companies have programs, and more organizations are getting into the EAP provider market. This creates positive aspects for the buyer who can choose between several credible EAPs, all very willing to meet the company's needs. However, some EAP providers are "paper EAPs" and lack the solid resources and experience that they promise. Consequently, providers should be screened carefully for competency and qualifications.

Consortium Model Pricing

Consortium programs can often cut costs, depending on how many companies are involved in the joint venture. Again, cost is very sensitive to program options (i.e., training, promotional activity, etc.). Usually the increase in the employee population reduces the pricing. If the consortium model provides training and evaluation from one central location instead of on-site at each of the different companies, costs can be decreased.

HMO/Insurance Company Interface

The first insurance-related question a company and EAP provider should ask when establishing an EAP is whether the company is self-insured. This will determine the direction the EAP should take. The second question to ask is for a review of the company's benefit plan. While outpatient counseling for emotional problems is usually covered, there is a growing concern in the insurance industry regarding the cost of treatments for non-medical problems. Thus, the EAP must interface with the company's insurance provider to ensure that benefits are approved for EAP recommended services.

The EAP provider will need to establish professional relationships and efficient communication with the company's indemnity plan provider or Health Maintenance Organization (HMO) to facilitate the employees' referral to services.

In designing and pricing a program that meets the company's needs, it is important to begin with a review of the company's

benefit plan and the various participation levels in the HMO or indemnity options.

The EAP will often need to verify employee eligibility and effectively assist employees/dependents in referrals that match the financial realities of the benefit plan. This is a significant help to employees.

HMOs all have different restrictions and requirements of service. Some actually require all employees to be assessed by their provider and followed by their provider. Other HMOs will accept the assessments and recommendations of the company's EAP. It is important to consider the flexibility of your company's HMO system, the number of employees involved, and how it will interface with the EAP when designing a program.

GUIDELINES FOR SMALL COMPANIES

An Example of How Small Systems Can Initiate EAPs

A Consortium EAP that has proven valuable is the Entertainment Industry Referral and Assistance Center (EIRAC), founded in 1984. It serves as an umbrella or consortium serving the entire film and television industry in Southern California. EIRAC currently offers referral, crisis intervention, and management education services for entertainment companies, their workers and family members. A 24-hour hotline handles calls for assistance or information about the program. The Center's headquarters are in a private office building in Burbank, California, within easy commuting distance of most of the companies in the consortium. The

companies involved are too small to have their own EAP, so they jointly developed and funded the EIRAC program to provide the needed services. As is typical, the workplaces are within a defined geographical area and are within the same industry. The economy of scale of this program depends on the number of employees covered and the specific components of the program.

Small employers might consider the following strategies in developing and implementing a consortium EAP:

- join together with other small transit systems in the same geographical area to develop a consortium program
- encourage a local business or industry association to provide educational seminars on dealing with the troubled employee and use the occasion as an opportunity to coordinate information on a consortium
- sub-contract services from an existing program in a nearby larger transit company
- join with other regional or local transit employers to retain a consultant specializing in group consultations, consortiums, and program development
- contract with a Health Maintenance Organization (HMO) or a Preferred Provider Organization (PPO) that provides treatment services
- contract with a local professional in private practice for Employee Assistance Services

- arrange for volunteer support for a program through local self-help groups or perhaps through an employee who is a recovering alcoholic or drug abuser
- arrange for ongoing educational seminars and awareness programs through local chemical dependency and mental health treatment facilities; they will usually provide such services free of charge because of potential referrals for treatment
- conduct a site visit to other small to medium-sized transit systems in the Inventory of Existing Programs of this project to determine how such programs can be developed despite limited resources (See the *Inventory of Existing Programs* found on pages 142-161 of the Appendix.)
- communicate with the local city or county government to learn if your system may associate with their EAP for assessment and counseling services
- contact an area hospital, college, or university to determine if they have a program that may be utilized
- contact the area (state or county) alcohol and drug abuse agencies to avail yourself of the pamphlets, newsletters, and technical expertise that exist at little or no cost.

SUMMARY

Once the transit system forms a Program Advisory Committee, has conducted a needs assessment, and has selected a program model and other program specifications, it develops a Request for Proposal (RFP) to help identify possible EAP providers. The price of the program depends on a number of variables including the number of employees and locations to be covered. There is a direct correlation between program pricing and the program features to be offered. Small employers have a number of strategies available to them in developing and implementing a program that is less expensive, most notably the consortium program model.

CHAPTER FIVE

Managing EAP Services

MANAGING EAP SERVICES

THE PROGRAM COORDINATOR

The Program Coordinator of the Employee Assistance Program is the representative at the company who interfaces with the EAP. The main responsibilities of the Coordinator include:

- Monitoring the EAP provider's performance
- Monitoring the effectiveness of the EAP
- Negotiating the EAP contract (usually done annually)
- Overseeing the promotional activities
- Planning and coordinating EAP activities (i.e. training, employee orientation sessions, news articles)
- Scheduling senior management briefings
- Coordinating Program Advisory Committee meetings.

In addition, the Coordinator will be an internal point of contact for supervisors, labor representatives, and employees to access EAP-related information.

The Coordinator will also be the point of contact for the EAP provider. In most cases, the Coordinator is often an employee who works in either the medical or personnel department.

In selecting a Coordinator, it is important to assess the individual's job functions and how the person is perceived by the general employee population. Is the Coordinator seen as fair and trustworthy? Since a

successful EAP depends on the assurance of confidentiality, the Coordinator must be identified as trustworthy by the employee population. The Coordinator should also possess a knowledge of the organizational system in order to help integrate the EAP into the existing company structure.

The success of an EAP likewise depends on the support of the top management team and the union. Thus, the level of importance given to the program is reflected by who is assigned as the EAP Coordinator.

IMPLEMENTATION PROCEDURES

The implementation plan outlines the actions needed to establish a fully functioning EAP. This outline states the responsibilities of the EAP manager and staff. Successful implementation encourages "ownership" at all levels of the organization: management, union representatives, and employees. The plan should include the following components:

- Resources for space and staff allocation
- Program promotion and employee communications activities
- Orientation, education, and training plans
- Recordkeeping and reporting procedures

- Appropriate health and mental health benefit coverage
- Strategies for program integration into the organization
- Quality assurance and liability coverage
- Identification of community resources
- Special provisions for geographically distant locations
- Program evaluation mechanisms.

(Please see the *EAP Pre-Contract and Implementation Procedures* on pages 105-107 of the Appendix, for a comprehensive outline of an Implementation plan. Also see the Exhibit on the next page for a more general *Program Implementation Checklist*.)

PROGRAM OPERATIONS

Successful EAPs deliver comprehensive, high-quality services; provide supervisor, management, employee, and union representative consultation and training; and maintain effective program management and administration. Clinical services include identification of employees needing assistance, assessment, referral, treatment, and follow-up.

Treatment

A comprehensive EAP should respond rapidly and effectively to the range of problems that employees present. The services provided should be appropriate for the assessed problem. Referrals for

appropriate treatment should be made when it is determined that the number of sessions provided by the EAP is not sufficient to alleviate the presenting problem.

Follow-up

Client follow-up and re-integration into the workplace are essential. The availability of post-treatment and follow-up services helps to ensure treatment success and a timely return to work. Ongoing consultation, within the confidentiality provisions, should be available to managers as they help employees. A written procedure for follow-up is important.

It is also important to have written policies regarding confidentiality. If employees are not assured that the program is confidential, they will not use it. If employees learn that the program is safe and confidential, they will reassure others that it is so, and the program will be utilized.

Liability

Liability coverage requirements vary depending on whether EAP services are provided internally by company employees or by external contracted providers. All service providers should be fully informed about liability coverage. The EAP should also determine that all providers have adequate professional liability coverage. Proof of coverage should be kept on file in the EAP office.

(Sample)

Program Implementation Checklist

- Week 1*
 - Contract begins
 - Start-up meeting with EAP advisory committee
 - Employee counseling available
 - EAP Policies and Procedures (draft) presented for review

- Week 2*
 - EAP brochure presented for review
 - Senior management briefing

- Week 3*
 - Policies and Procedures approved and distributed to managers

- Week 4*
 - EAP brochure to printer

- Week 6*
 - Supervisor training sessions conducted
 - EAP announcement letter and brochure sent to employees' homes (as supervisor training is being conducted)

- Week 8*
 - Supervisor training make-up sessions conducted
 - Employee EAP orientation sessions conducted

- Week 12*
 - EAP posters placed in visible areas in the workplace

- Week 17*
 - EAP Quarterly Report submitted to liaison

- Week 26*
 - Payroll stuffers provided

PROMOTING THE PROGRAM

To be effective, the EAP must be viewed as a benefit to employers of sound business practice. It is important for employers to know that healthy employees are considered an asset to the company. Many employers will ask, especially in times of limited financial resources, "Why are we spending money on this 'frill' when other needs are so glaring?" The answer to that question must be two-fold: first, the company cares for the well-being of its most valued resource -- people; and second, prevention, early intervention and treatment programs promote employee health and well being. When problems are left unattended, they often become extremely costly to the organization in terms of healthcare costs, accidents, lawsuits, absenteeism, etc.

Marketing Trust and Competence

Personal problems are by definition those life problems which affect us personally and emotionally. Therefore, when promoting the EAP to employees, trust and competence are important. Individuals will share private information only with people they feel certain will treat them with respect and dignity, keep information in confidence, and help them resolve their problems. The EAP should be set up as a confidential program staffed by trustworthy and competent providers.

Trust is built over time, difficult to gain, and easy to lose. The EAP counselors should have both formal and informal opportunities to demonstrate their concern, objectivity, and respect for others. Therefore, whenever the EAP is promoted, an EAP counselor should be present and have an opportunity to interact with employees.

Formal activities can include supervisor training, employee orientations, educational seminars, or other group presentations. EAP counselors can also be members of employee advisory or focus groups aimed at recommending policies or activities to improve employee benefits, communications, morale, or team building.

Informal activities can include "walk-throughs" (best done with members of the EAP Advisory Committee), riding with drivers, attending company picnics and parties, and eating in the employee cafeteria. It is important for the EAP counselor to be involved in and knowledgeable of the transit system. Of course, a consistent message of respect for privacy must be communicated at all times.

Competence is reflected in several arenas. First, credentials (degrees, certifications, experience) must be accurately communicated to the employee population in written material and at presentations. A proven ability to solve problems, offer realistic alternatives, and help in choosing practical solutions is critical. People want to talk with an individual who is expert *and* down to earth. Competence is reflected in one's ability to help and be accessible to those in need.

TRAINING

Encouraging appropriate use of the EAP is an essential role of the EAP provider. Everyone in the organization needs to be addressed in various formats with full program support as the goal. Once the final decision to implement the EAP has been reached, a training and promotional plan must be developed. Although the types of presentations and materials and the delivery schedule will vary, certain activities are

essential to successful implementation. These include:

- Executive briefings
- Supervisor training
- Union steward training
- Employee orientations
- Promotional materials.

Executive Briefing

Prior to any formal announcement of the EAP, senior management should clearly understand and endorse both the concept and the specific EAP plan. An Executive Briefing is usually conducted (lasting between twenty minutes and one hour) to orient management to the program. During the briefing, management should meet the EAP provider; understand program policy, objectives and procedures; and review the training outlines and the promotion plan. These meetings should be succinct, yet provide ample time for questions. Depending upon senior management's level of involvement earlier in the implementation process, presenters should be prepared to answer questions regarding the value of the EAP as well as cost impact data. Senior management should be informed of the importance of their roles as promoters of healthy lifestyles, the EAP as a resource to employees, and the EAP as a positive tool for supervisors.

Supervisor Training

Supervisor training provides an orientation to the program and a means of skill acquisition. The training should be conducted annually and be designed with consideration to other company training programs addressing areas such as discipline, performance appraisal, etc. The

primary goals of supervisor training are for supervisors to gain a clearer understanding of EAP objectives, policies, and procedures; and to understand their role in the EAP process.

Every effort should be made to assist supervisors in overcoming their own resistance to referring employees for help. Their discomfort with personal problems, reluctance to confront poor performance, and fear of legal repercussions are among the barriers supervisors face. Trainers should stress the value of using the EAP as a consultative resource whenever supervisors are faced with a sensitive personnel problem or difficult performance issue.

Supervisor training is best delivered by the EAP provider in conjunction with a company spokesperson. The EAP provider should be a training specialist who is knowledgeable of transit supervisors responsibilities. The company spokesperson should be prepared to answer questions regarding company policy and the EAP's impact on company operations, policies, or procedures. Group size should be kept to a maximum of 30, with 15-25 attendees being optimal. Various training methods can be employed: didactic, small group discussion, brainstorming, individual and group problem-solving, and role-playing.

Packaged video training programs are available and can be used to enhance the training. Relying solely on the video, however, will fall short of program objectives. Trainee interaction is critical for effective learning when dealing with such issues as interpersonal communication and constructive confrontation. Total training time is two to three hours. (See the *Outline - Supervisor Training for the EAP* on pages 108-109 of the Appendix, and the *Annotated*

Bibliography and Resource List found on pages 124-141 of the Appendix.)

Employee Orientation

Face-to-face employee orientation sessions are the most effective way to introduce the EAP to the general employee population. These sessions should be brief (15-30 minutes), and group size should range from 20-50 attendees. The primary goal of an orientation is for employees to gain a clear understanding of the EAP and how they can access it. EAP counselor(s) and company representatives should be present to answer procedural and policy-related questions.

The content can be a simple who, what, why, when, where, and how, or can be more detailed as time permits. Confidentiality should be stressed as the cornerstone of the EAP. Since this is one of the first opportunities to meet an EAP counselor, it is imperative that the counselor should demonstrate competence, trustworthiness, openness, and accessibility. Ample time should be left for questions and answers. (See the *Outline - Employee Orientation to the EAP* on page 110 of the Appendix).

Such employee orientation sessions, as described above, are extremely difficult to arrange in the transit industry. Therefore, the EAP must be innovative and persistent in its outreach and promotional efforts. EAP counselors can introduce the program and improve program visibility on a less formal basis by attending union meetings.

Walk-throughs

If formal orientation sessions are not possible, scheduled departmental walk-throughs are another way to introduce the EAP. Employees can be called together by a supervisor and a brief introduction to the EAP can be provided by an EAP counselor or the company's EAP Coordinator. For walk-throughs to be effective, they must be conducted during all shifts so that the entire employee population is exposed to the program. However, there are significant drawbacks to using walk-throughs. Employees may question the confidentiality of the EAP when the EAP counselor is accompanied by someone from management. Likewise, the format does not lend itself to many visual aids. The message should therefore be made simple and clear, emphasizing the types of problems covered, the high level of confidentiality, and the accessibility of the EAP program.

Education/Prevention Services

The EAP is an excellent vehicle to provide employees with accurate, useful information on a variety of subjects dealing with "life management" and wellness topics. (See the *Sample Listing of Employee Seminars* on page 111 in the Appendix). Educational seminars can be offered during mealtimes or before/after working hours.

In addition to providing new information and skills to employees, these seminars are an ideal opportunity to position the EAP as a caring problem-solver. The EAP counselor leading these presentations will become a "safe" person with whom employees can talk, should a problem arise in their lives. (See the *Scope of Services for an EAP*

Provider on pages 112-114 of the Appendix.)

PROGRAM COMMUNICATION AND PROMOTION

The EAP must be communicated as a helpful and accessible resource. Written communication should be direct and clear, stressing the EAP as a prepaid company benefit to be used as an early intervention tool as well as for crisis situations. Types of written communication and promotional materials used will depend upon the communication style of the company.

Prior to program implementation, a communication plan should be developed. It should begin with an introductory letter from the chief executive, general manager or president of the company, accompanied by a program description. (See the sample *EAP Introductory Letters* on pages 115 and 116 of the Appendix.) In most cases, a descriptive brochure is an effective way to advertise the program. Such brochures should include the types of problems covered, eligibility, cost, confidentiality guarantees, and how to access the EAP. This brochure should be available at the worksite and be sent home so family members can learn how the EAP can benefit them. Wallet cards can also be provided to employees and family members. (See the sample *EAP Handout* on page 117 of the Appendix.)

Written communication should be conducted on a regular basis and reinforce the message that the EAP is there to provide help . Pay envelope stuffers, posters, tabletop "tents", and calendars are possible promotional materials. A consistent, visual image on a variety of promotional materials best promotes the program. For example, a

poster could be displayed around the worksite and be followed by a similarly designed pay envelope stuffer two weeks later. Posters should be changed and recycled on a regular (quarterly) schedule. Materials should be personalized for each company.

Ways to promote the EAP are limited only by the creativity of those responsible. Every effort should be made to keep the EAP familiar to the employees. Articles in the company newsletter, a separate EAP newsletter, or informational briefs on health and mental health topics are effective. Displays at company health fairs, benefits programs, family days, etc., can put the EAP in a positive light. Getting EAP input in various company policies (i.e. AIDS, parental leave, drug testing, etc.) can support the utilization of the program.

PROGRAM EVALUATION

Quality Assurance (QA)

To 'evaluate' means to make a judgement about the value of something. Evaluation is defined as *the process of collecting objective information to enable one to better judge efficiency and effectiveness.*

The EAP provider should explain how they ensure the quality of the EAP. What accountability or program control measures are in place to assess program effectiveness and the quality of clinical services to be provided?

QA/Effectiveness of Program

To ensure a high quality program, the EAP should have:

- a client information collection system whereby non-identifying information is shared with the company's EAP Coordinator (while adhering to confidentiality laws)
- EAP audit/evaluation system
- employee evaluations (while adhering to confidentiality laws)
- training evaluations
- data processing capabilities
- utilization reports which record frequency of use, problem categories, and demographics (while adhering to confidentiality laws)
- regular case management meetings to review and monitor active cases
- documentation and recordkeeping requirements of case files.

(See the *Client Demographics Form* on pages 118-119 of the Appendix)

Training and Clinical Services

The in-service training and staff development programs should:

- adhere to confidentiality laws
- utilize a policies and procedures manual
- have a screening criteria for referral resources
- have a formal follow-up and case monitoring system.

Incorporating a systematic evaluative component into an EAP is essential. Monitoring the efficiency of program operations and assessing the overall quality of program services are important aspects of evaluation. Another factor concerns the impact the program is having on the company, especially in terms of cost savings.

In this era of rising health care costs, dwindling profits, and general economic uncertainty, companies are looking to cut operating costs whenever possible. EAP professionals have long argued that EAP costs are sufficiently offset by improved employee job productivity and reductions in health care costs. However, to objectively demonstrate this, programs need to collect reliable data on impact issues such as employee productivity, absenteeism, accidents, EAP satisfaction, client outcome, and cost benefit analysis. Today, more than ever, EAP Coordinators are faced with the task of demonstrating the economic justification for their programs.

Questions regarding program evaluation can be divided into two areas: EAP Process Evaluation and Impact/Outcome Evaluation.

Process Evaluation

This is the measurement of the efficiency, effectiveness, and quality of the ongoing work of the EAP. Program statistics and customer surveys provide subjective and objective data for process evaluation. Typical process issues/questions are:

- number of clients who have used the program
- types of problems presented

- types of referrals, i.e., self, supervisor, or referral by a concerned party.
- waiting time between initial contact and appointment
- characteristics of the clients compared with overall employee population characteristics
- number of referrals accepted by clients for treatment
- number, types, and effectiveness of training sessions held
- number and effectiveness of posters, newsletter articles, brown bag seminars, or employee orientations delivered
- number of management consultations delivered
- quality/effectiveness of treatment providers
- have clients been treated with respect and courtesy?
- have all contacts with the EAP been kept confidential?
- has the location of the EAP been convenient and appropriate?
- have employees been satisfied with the overall program?

Companies need to gather this information to determine if they are getting what they have paid for. The Appendix contains two program evaluation tools: the *EAP Customer Service Evaluation for Employees and Family Members* on page 120 and the

Company EAP Contact Person Survey on page 121.

Impact/Outcome Evaluation

While process evaluation provides information that is very important in getting a picture of the day-to-day activity of the EAP, it does not answer the larger question, "Are these services actually helping the employees and the company?" To answer this, an impact /outcome evaluation is necessary. An impact/outcome evaluation focuses on the degree of change in employee behavior and job performance following the implementation of an EAP. Companies are interested in knowing whether the EAP is impacting employees and the organization positively. Examples of the types of impact questions commonly asked are:

- Is the EAP reaching those who need it?
- Are employees and family members receiving the help they need?
- Has there been improvement or resolution of their problems?
- In cases involving supervisor referrals, has job performance improved?
- Is the program cost effective?
- Does the program help prevent accidents, absenteeism, and worker's compensation and disability claims?
- Does the program help the company save money in terms of substance abuse and mental and general health care cost, time spent by management in resolving performance problems, and increasing worker productivity?

Barriers to Program Evaluation

Impact/outcome evaluation studies are generally more difficult, costly, and time consuming to conduct than process studies. Most companies are able to conduct some form of EAP evaluation but are not equipped to undertake full-scale evaluative research. Each organization must determine its evaluation needs and priorities, and assess its resources. The following questions should be considered.

- What are the most important questions to answer?
- Who receives evaluation results?
- What resources are available to conduct the studies?
- How much time will such studies take?
- How expensive will each study be?
- What is the available budget?
- Who should conduct the evaluations?
- How sophisticated should the studies be?
- Is it necessary to have an external evaluator?
- What are the methods to be used to gather the data?
- Is the data that are needed available, accurate, and reliable?
- Can the evaluation be done without compromising confidentiality?

Serious planning is necessary to conduct such research. The importance of having the evaluation be designed with distinct objectives and a clearly defined audience in mind cannot be overemphasized.

Before proceeding with any evaluation, one should be aware of the potential barriers and roadblocks that can undermine its success. Among these obstacles are the following:

- time constraints
- union/management relationships
- financial resources
- reliability and accuracy of employee records
- access to cost data
- access to employee records
- research expertise
- management attitudes
- employee attitudes
- staff attitudes
- confidentiality considerations.

Careful consideration of these potential barriers allows for more effective and realistic planning, fewer surprises, and will likely save time, money and frustration.

Again, these barriers apply largely to impact/outcome evaluations rather than process evaluations. Many process evaluation measures can and should be routinely collected and interpreted by the EAP staff. These include items such as demographics, number and types of referrals, types of treatment resources used, amount of training conducted, and similar items. Routinely evaluating training and conducting periodic employee surveys are simple and cost-effective ways of gathering evaluative data on the program. Process measures such as these can be used as a regular part of the EAP's management system for the purpose of monitoring and

improving particular areas of EAP functioning.

What Constitutes an Effective, Successful Program?

EAPs in transit systems can be evaluated and improved by a careful review of the following services:

- 1) Hiring competent personnel to provide assessment and referral services
- 2) Maintaining confidentiality
- 3) Understanding of emotional concerns, drug abuse, and alcoholism as health problems
- 4) Intervening when needed on the basis of impaired job performance and rule violations
- 5) Conducting systematic, on-going program evaluation
- 6) Maintaining adequate insurance coverage and referral mechanisms
- 7) Streamlining record-keeping to serve evaluation, confidentiality, and insurance needs
- 8) Providing adequate program promotion efforts
- 9) Having labor play an integral role in the EAP
- 10) Maintaining utilization rate between 3 and 6 percent and a documented reduced incidence in employee problems (reduced evidence of drinking, absenteeism, etc.).

EAP evaluation should be an ongoing endeavor. EAPs need to build a system of program evaluation into the fabric of their day-to-day operational procedures. Ideally, this system should include aspects of both process and impact/outcome evaluations. Demonstrated effectiveness will become increasingly important in the future as EAPs compete with other employee benefits for limited corporate resources. Successful EAP evaluations involve clarity in asking the questions, care in selecting the evaluation techniques, and objectivity in analyzing the results.

SUMMARY

As the EAP field matures, program evaluation strategies will continue to improve. Program Coordinators are discovering the importance of accurate program evaluation.

As EAPs become more established, systematic data collection and record keeping is quickly replacing the anecdotal, case history approach of the past. As the range of services has expanded and become more complex, the need to better monitor and manage program services with systematic information has become evident.

The EAP field has become more competitive as the pressures to contain skyrocketing health care costs have increased. EAPs are seen as a tool to control costs by improving work attendance and job performance. Extensive evaluation of program data is needed to analyze program efficiency. Monitoring the quality of the services offered will remain essential to comprehensive program evaluation.

CHAPTER SIX

Case Studies

CASE STUDIES

REAL WORLD PERSPECTIVE - THE CTTRANSIT EXPERIENCE

The EAP at CTTRANSIT has evolved significantly over the past 15 years from what was originally an alcoholism recovery support group initiated by concerned employees to a fully contracted broad brush program utilizing an outside EAP provider. In many respects, this was an idealized process which other transit systems may not have the time or resources to emulate. Nevertheless, the evolution of the CTTRANSIT program may be instructive in illuminating key underpinnings of a successful program.

The greatest strength of the program has clearly been the continuing involvement of a group of concerned employees representing a diverse cross-section of the workforce. The 15 original members of the "Alcoholism Recovery Committee" included hourly-rate bus operators and mechanics, first line supervisors, and a senior manager. Among all these individuals, concern to help fellow employees transcended their union or management affiliations. Some members of the committee were recovering alcoholics for whom involvement in a highly informal outreach program became an important part of their own ongoing recovery.

This group provided general support and referral to various community resources for other employees over a period of several years. The dedication and personal

commitment of these individuals was instrumental in making their efforts credible within the workplace. Moreover, while the committee carefully maintained independence from both management and the union, its existence was actively supported by both parties.

In 1985, CTTRANSIT entered into a "preferred provider" arrangement with a local EAP firm. Under this arrangement, the firm allowed CTTRANSIT to publicize its 24-hour "hotline" number for employees and family members and to provide counseling services at substantially reduced hourly rates. In turn, CTTRANSIT became a source of clientele for the firm's in-house counseling programs. CTTRANSIT incurred no cost for this arrangement. The EAP firm also offered a variety of management training and policy consultation services on a fee-schedule basis, although these were not utilized.

During this period, the original Alcoholism Recovery Committee was expanded in each of CTTRANSIT's three operating divisions. In addition, an EAP Steering Committee was established with representatives from each local division for the purpose of coordinating an overall company-wide program, sharing ideas, and publicizing EAP services to all employees and their families. One early product of the Steering Committee was CTTRANSIT's first formal EAP brochure, copies of which were mailed to each employee's home address. The Steering Committee was intentionally composed of one salary and one hourly-rate

employee from each division, with the Assistant General Manager for Transit Services acting as the Committee's facilitator.

Over the following two years, the preferred provider arrangements proved surprisingly effective, despite some limitations. In retrospect, this arrangement gave CTTRANSIT managers their first opportunity to utilize the EAP as a management tool. It allowed them to underpin policies and procedures regarding absenteeism, drug and alcohol use, and other issues with a reminder that EAP services were available to assist troubled employees.

In late 1986 and early 1987, CTTRANSIT conducted a Request For Proposal (RFP) process to select a broad brush EAP contractor. This represented the final step in the evolution of the program from a voluntary peer-referral support group to the no-cost preferred provider arrangement to the broad brush external provider arrangement. The EAP Steering Committee's active involvement in reviewing the RFP responses for selecting the best qualified firm was a key step in helping to make the final selection more credible to employees and the union.

Since the program began in 1987, nearly 200 individuals have utilized EAP services. This annualized utilization rate of approximately 7.5 percent demonstrates that the program has been well received by employees and their family members. Normally, a 5 percent utilization reflects healthy application of an EAP.

Over time, the percentage of self-referrals has increased significantly. This is probably

the best indicator that the program has been communicated to employees as a credible, caring and confidential source of help for personal problems.

While substance abuse has historically been the most common problem of employees accessing the EAP, it represents the primary problem in less than half of all cases. Marital, family, and other "relationship" problems account for the next largest number of EAP contacts. Such data confirms that the program has been successfully developed as a broad brush resource for addressing many types of personal and family problems.

About one-fourth of the cases at CTTRANSIT were effectively resolved by the EAP without need for additional referral. A lesser number of cases were presented to the EAP "in crisis," resulting in immediate referral for treatment. Follow-up over the past four years, indicates that nearly three quarters of the client population experienced improvement or resolution of the problems originally presented.

Overall, this data indicates three critical measures of the success of the EAP at CTTRANSIT. The necessity of a broad brush approach capable of addressing any type of personal or family problem is demonstrated by the wide range of issues presented by employees to the EAP. The successful integration of the EAP within CTTRANSIT management, as well as among rank and file employees, is demonstrated by the numbers of self-referrals and company-referrals. That most problems were apparently resolved successfully is the best predictor of future success.

Notwithstanding this generally positive experience over the past few years, CTTRANSIT has identified two areas for additional emphasis in the future. First, the level of utilization by family members has been below that expected. An employee's job performance can be affected by his or her concern over a family member's substance abuse, emotional crisis, or personal problems. Conversely, even if an employee resists seeking help for his or her own problems, family members who are affected can find solace through the EAP. Employees' spouses, children and other immediate family members are now being targeted in efforts to re-publicize and promote the EAP.

Second, beginning in September, 1990, CTTRANSIT became the first major transit system in New England, and one of the largest systems nationwide, to implement random drug and alcohol testing of its nearly 700 "safety-sensitive" employees. In preparation for this program, a major effort was undertaken to promote EAP services for employees whose use of drugs or alcohol put them at risk for a positive test result. In fact, the actual commencement of testing was delayed approximately six weeks from the announcement date in order to provide an additional opportunity for employees seeking help through the EAP to receive it. Again, however, the level of response was generally below that expected.

During the first three months of the testing program, the rate of positive random test results averaged approximately two percent, with testing performed at the 50% annualized rate of employees, (e.g., on a pre-employment, post-accident, and/or reasonable suspicion basis).

Having a drug and alcohol testing program without an Employee Assistance Program (EAP) is much like having a diagnostic laboratory test without a doctor or a hospital. Employers wish to help and retain valued employees. Discipline or firing because of positive drug/alcohol test results, without an initial offer of assistance, is contrary to American business ethics as well as profit considerations.

CTTRANSIT's experience has clearly demonstrated the integral role an EAP can play in efforts to eliminate alcohol and drug abuse from the workplace.

**REAL WORLD PERSPECTIVE -
OTHER TRANSIT SYSTEMS'
EXPERIENCE**

The following situations are samples of true EAP case studies submitted by other transit systems to provide examples of how an EAP program can respond to a variety of employee needs. Once again, it reinforces the value of broad brush programs that address a wide variety of problems and referrals.

.....

A conductor was referred to the Employee Assistance Program because he had been disciplined repeatedly (5 times) for late remittance of cash reports. Although he had received progressive discipline for these offenses, the latest one having been a 90-day suspension one year before, it had not produced the desired change, since he was now facing dismissal.

His union representative, in a last ditch effort to save the conductor's job, came to

the EAP and indicated that he believed the cash shortages were due to the conductor's financial problems and asked if the EAP might be able to assist the conductor. The union representative was able to convince the company to postpone the disciplinary hearing, pending the outcome of EAP treatment intervention.

The conductor utilized the EAP. Through a careful evaluation of what was originally presented as a financial problem, the EAP counselor was able to determine that the conductor was a compulsive gambler. The counselor prescribed a course of treatment, including individual counseling, group counseling, attendance at GA meetings, financial counseling, and legal counseling.

After one month, the conductor was able to return to work. He has worked for five years now without a reoccurrence of his gambling problem and without any job performance problems.

.....

A mechanic had been experiencing severe headaches each afternoon which led him to request additional breaks. On several occasions, he left work early. His supervisor encouraged him to seek medical attention to get to the bottom of the problem, as it was clearly beginning to interfere with his work. On many occasions, the employee seemed very tense, preoccupied, and irritable, so much so that co-workers were beginning to comment. Finally the supervisor asked the employee why he didn't see a doctor. The employee casually commented that it was pointless. He was certain that he had a tumor, like his mother who had also experienced headaches and who had passed away five months ago.

The supervisor spent time talking privately with the employee who clearly admitted to having difficulty living alone since losing his mother. The supervisor suggested to the employee that he talk to the EAP counselor and get some support for himself in working through this loss and adjustment period. The employee seemed to have little knowledge of the EAP but was receptive to the information the supervisor provided him. He was surprised to hear that he could receive an assessment without needing to pay anything out of his own pocket. He was also pleased to hear that the EAP could help him obtain a good medical referral to discover the cause of the headaches and to learn if the headaches were related to stress or a physical disorder. Together, from the supervisor's office, they called the EAP and arranged for the employee's first visit.

.....

A bus driver called the EAP about problems with his adolescent son. This was after his supervisor had returned from an EAP training session and mentioned that the EAP provided services for family members as well as employees. When he called, he found out that the EAP counselor was skilled at assessing adolescents and in providing crisis intervention to families. At this point, the employee was not sure if his son had a serious problem, or if he was just acting out and developing behavioral problems which were typical for adolescents at this stage of development.

The employee, his wife, and son came to the first EAP appointment and learned that the EAP counselor would see them for one to three sessions to conduct an evaluation and make recommendations for further assistance. The counselor met with each of

them separately, and then all together, and suggested on the second visit, that they bring in their other son, who was two years older. It had become clear that sibling rivalry and inconsistent disciplinary practices were problems and that more information was needed. After the second session, the family was referred by the EAP to an outside source for family therapy.

.....

An engineer voluntarily contacted the Employee Assistance Program for help with a marital problem. His wife was contemplating leaving him and was refusing to consider marital counseling. The EAP contacted the spouse and was able to convince her to come in for a session.

The conjoint family session helped all parties to understand that the engineer was suffering from alcoholism. The family was engaged in a treatment plan, whereby all members received either chemical dependency or co-dependency treatment.

This engineer is now sober, has been clean for approximately five years, and presently sponsors a number of fellow employees who are newcomers to Alcoholics Anonymous. The marital problems were resolved quickly when the primary problem of alcoholism was treated.

SUMMARY

These case studies are provided to demonstrate how effective EAPs can help transit systems to better achieve their goals of safety and retention of valued employees. EAPs reach out to employees early, before their problems threaten their jobs. Early intervention can prevent such problems from having a negative impact on transit system safety, productivity and performance.

CHAPTER SEVEN

Issues and Future Trends

ISSUES AND FUTURE TRENDS

Societal trends shape the kinds of problems EAPs need to confront. We have recently gone from a period of relative wealth and security to a period of economic insecurity and political instability. Factors such as the high unemployment rate and stagnant economy are variables that will continue to affect our future. In the last few years, most companies and businesses have experienced down-sizing and reorganization. Companies are running "lean machines", working with fewer people to accomplish more. Society contains more dual career families and latchkey children than ever before, thus transforming the modern family structure. People are required to have an extraordinary capacity for juggling and balancing life's priorities. Single parent families are stressed and struggling; adults are "sandwiched" between child care and elder care. New addictions are emerging alongside the more traditional addictions as the conflicting needs, goals, and responsibilities of the 1990s place tougher demands on the workforce.

Today's changing society constantly surfaces new issues with which EAPs must deal. These issues frequently manifest themselves as worker problems, bringing with them new challenges to the EAP field. EAPs exist on the edge of change, for they evolve according to the prevalent issues of the time. What is of serious concern in one geographic area of the country may be of less consideration in other areas. EAPs need to respond to the specific concerns of their target population in their assessment and referral work, as well as in the training and consultation that they offer transit

systems. EAPs must remain open and responsive to change. EAPs need to function as skilled facilitators of change, increasing their level of integration into the constantly evolving workplace.

ETHICAL ISSUES

Standards of Conduct apply to all EAP professionals. EAP professionals are expected to adhere to the code of ethics of their professional organizations and licensing and certification bodies. Any conflict of interest, actual or perceived, among EAP professionals and service providers should be avoided and Conflict of Issue Statements filed when appropriate.

Ethical issues often exist around the sponsorship of the EAP when conflicts arise between human service goals and the goals of the company. Ideological support by the company providing an EAP does not ensure that values promoting employee well-being will always prevail in the workplace. The power of the company's funding of the EAP in relationship to dictates on employee problems and EAP interventions are areas worth examining. Sponsorship of a program should not affect accountability, confidentiality, referral processes, service delivery, or utilization.

At times a values conflict may exist between human service and corporate goals. EAP professionals tend to be motivated by values that prompt advocacy and the promotion of equity. However, they are often aware of structures and processes in a company that

may not be equitable, safe, or supportive of health. The guiding answer to such ethical dilemmas is often best derived from the mission and code of ethics of the EAP. The EAP must establish a track record for competent service. EAPs have moved from occupational alcoholism to broad brush programs toward a trend of providing input that redefines work conditions, jobs, and interpersonal relationships. EAPs of the future will advocate for more democratic processes and will help to improve the quality of work conditions.

LEGAL ISSUES

New DWI Laws

New federal rules will submit commercial drivers who drive large vehicles to stricter drinking and driving standards than those given to other motorists. In most states, a blood alcohol level of 0.1 percent classifies a driver as driving under the influence. Under the new rules, however, 0.04 percent is the minimum needed for a commercial driver to be considered to be under the influence.

Drivers with a blood alcohol level of 0.04 percent or more will be disqualified for one year from operating commercial vehicles. Drivers caught violating the 0.04 rule a second time will be disqualified for life. Refusing to submit to a blood alcohol test will also be considered a disqualifying offense. While individual states will determine the extent of enforcement of the rules, the broader issues raise the need for some form of coordinated response system.

Rehabilitation Act Implications

The Rehabilitation Act of 1973 and the subsequent development of the 1978 Comprehensive Rehabilitation Act Amendment resulted in a definition and clarification of a "qualified handicapped individual". These are important pieces of legislation that have implications for the workplace EAP. Persons suffering from alcohol or drug addiction are among those with physical or mental disadvantages. These people are protected by the laws prohibiting discrimination against people with a current or former handicap who are otherwise viewed as qualified to work. This act also clarified issues pertaining to situations where the nature of the work involved "safety sensitive" concerns. It stated that active, current substance abusers are excluded from this ruling due to the direct threat that current alcohol or drug abuse poses to the property and safety of others.

Liability

Liability coverage requirements vary depending on whether EAP services are provided by federal employees or by independent contract personnel. When selecting an EAP service provider, it is important to be sure that all counselors are fully informed about coverage requirements and have adequate personal and professional coverage in their areas of competence and expertise. Proof of coverage should be kept on file in the EAP office.

Confidentiality/Legal Implication

Much has been already discussed in this manual about confidentiality, but there is always more to be said on this topic. Legal confidentiality requirements and procedures must be strictly followed and all staff associated with an EAP needs to be fully aware of regulations that apply to discussions, records, and other information gathered in the context of the EAP, as discussed in Chapter Four. Special legal restrictions apply to drug and alcohol issues and all EAP staff should be fully aware of these laws. Client consent and release of information forms should be utilized.

To further complicate the matter, there are times when the EAP is compelled to broach confidentiality (i.e., when the employee/family member is in imminent danger or if he or she poses a serious threat to someone else). Again, EAP staff must be well versed in these laws and must communicate this legislation to appropriate company personnel.

THE MANAGED CARE ENVIRONMENT

The status of employee health care benefits, the quality of care received, and the rising costs of health care are common concerns of the workplace in the 1990s. Managed Health Care is a growing response to these concerns.

In the early 1980s, Health Maintenance Organizations and Preferred Provider Organizations were developed to curtail the soaring costs of health care. Managed Health Care is the insurance industry's

recent move to stop the rising cost of health care. However, these organizations have significantly restricted the availability of mental health and substance abuse counseling services: namely, they resist inpatient referrals and often exclude substance abuse treatment from their covered services.

EAPs are being integrated with managed care cost containment methods. Employee benefit systems are an integral part of Managed Care. EAPs are increasingly becoming aware that, in order to effectively assist employees, they need to redefine their relationship with the benefits department. EAPs can function as a real benefit to both the employee and the employer as a workplace resource and an advocate for the employee's right to quality treatment. EAPs can ensure that the employee is properly matched with the appropriate services.

A positive relationship between the EAP and the benefit structure is necessary to best serve the employee and the company. EAPs of tomorrow will often be linked with managed care systems, will provide the managed care product themselves, or at the very least will act as an internal benefits consultant to the corporation.

Wellness Issues

EAPs will continue to collaborate with workplace's health education/prevention/health promotion programs. Health promotion programs are highly consistent with the philosophy underlying most comprehensive EAPs. Traditionally, EAPs' therapeutic approach has been, to a large extent, based upon motivating behavioral change toward a healthy lifestyle. Some

experts in the wellness and EAP field see the EAP as an integral part of a wellness program, and vice versa. These programs are designed to help employees make informed decisions and take actions toward improved health. They also support the detection and treatment of medical, emotional, and substance abuse problems. The EAPs and wellness programs of tomorrow will form a creative, committed workplace team that compliments one another.

Traditional broad brush EAPs have not focussed on areas such as wellness and health promotion. Increasingly, employers are realizing the need to recognize the total person and health needs of employees. Robert Rosen, in his book *Healthy Companies*, tells us that in a typical workforce:

- 29 percent of the workforce smokes cigarettes
- 15 - 25 percent are overweight
- 80 percent don't get enough exercise
- 10 - 20 percent have substance abuse or mental health problems
- 35 - 45 percent suffer from burnout on the job.

Wellness and prevention activities enhance traditional assessment and referral services by promoting total health and well-being. Companies in the 1990s are opting to provide health promotion strategies as part of their EAPs or in tandem with other employee services to support health and fitness.

Wellness programs concentrate on the total well-being of employees and their families. They can include services such as on-site fitness centers, nutrition and weight loss programs, training in stress management, and interpersonal coping skills. Wellness activities, like other traditional EAP services, help reduce health care costs and increase employee productivity.

Solid preventive measures that improve and maintain the health of the individual need to be properly focused and integrated with EAP services. Wellness programs should be structurally separate from EAPs but organizationally linked. Both systems are more effective when coordinated and functioning jointly. While the background and skills required of the two program staffs are different, the connection of the two programs, working together, helps engage potential clients and supports employee well-being.

Small to medium-sized companies can develop mechanisms to encourage their employees to stay healthy. Many have already recognized that the company bears responsibility for the health of its employees through the policies it sets, practices it encourages, and the physical environment in which it operates. Small companies are especially well-suited for implementing wellness programs because they often have the owner or president directly involved in related decisions. Many small businesses also have a family orientation, and wellness activities are often seen as an example of caring management. When there is a small staff, with each employee wearing different hats at different times, absenteeism can be a real problem. Wellness programs can

improve health and morale and result in increased productivity and profits.

ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS)

In 1991, it is estimated that there will be 74,000 new AIDS cases, in addition to the current total of 94,280 already reported. No effective chemotherapy is available and no foreseeable cure has been discovered for the Syndrome. The implications seem more severe when considering that it is estimated that one to two million people in our country will be infected with the virus over the next few years.

Some new facts about AIDS:

- New Federal and State laws are being considered that regard AIDS as a handicap, prohibiting discrimination against individuals with AIDS.
- The states with the highest number of reported AIDS cases among their population are Texas, Florida, New York, California, and New Jersey.
- Data suggests that in the 1990s there will be a growing number of AIDS cases outside the major metropolitan areas in secondary cities.
- In proportion to the total number of reported AIDS cases, the percentage of hispanics and blacks with AIDS is increasing, while the

percentage of bisexual and homosexual men with AIDS is decreasing.

- The World Health Organization states that 136 countries have now reported AIDS cases.

Employees with AIDS require specialized support services in order to function on the job as long as they are medically fit to perform. An EAP professional will often direct employees who have AIDS to appropriate AIDS-related services, act as an internal consultant to the work organization, help management develop appropriate policies and benefit structures, and help supervisors and co-workers understand and cope with the presence of the disease in the workplace. The EAP should work to develop mandatory AIDS education programs as well.

CULTURAL DIVERSITY

It has been projected that by the year 2000:

- White males will make up only fifteen percent (15%) of new additions to the workplace.
- Non-white ethnic groups will make up twenty-nine percent (29%) of those additions - two times the current percentage.
- Sixty to sixty-five percent (60-65%) of women over age sixteen will have jobs and will constitute more than forty-seven percent (47%) of the labor force.

With these changing demographics, it is essential to understand different groups' cultural backgrounds in order to find ways to reach these employees in both the initial referral to the EAP and in treatment.

Everyone experiences conflicting obligations and social disorientation when they feel alienated and out of place. Problems such as these have a direct impact on productivity, job satisfaction, and morale. Discrimination has likewise been a problem for many ethnic groups and minorities for years.

Increasingly the EAP must deal with the communication gaps, lack of trust, and differences in expectations of employees. EAPs are often involved in designing company training programs and providing resources for workplace concerns. Many companies are hiring cultural diversity consultants to assist in establishing awareness programs and conducting workshops. EAPs need to initiate work in this area within the companies. Information on resources in cross-cultural training is available in the resource listing at the end of this manual. (See the *Annotated Bibliography and Resource List* found on pages 124-141 of the Appendix.)

EMPLOYEES AND THE TRAUMA OF RELOCATION

There has been a dramatic increase in international business in the United States over the past several decades. The growth and relocation of companies nationally and internationally have brought about a rapidly increasing number of American families who must relocate. The impact of a new culture or of uprooting one's family can adversely

affect the employee's job performance. EAPs have recently begun offering services to those who need assistance.

FAMILY CONCERNS

Childcare, eldercare, divorce, family violence, dual career families, and latch key children are other problems confronting today's workers. These issues are creating new pressures that can spill over into the workplace when left unattended.

- Compared with the workforce of the 1980s, people under twenty-five will represent a smaller share of the total labor force in the 1990s.
- According to a study conducted by the University of Bridgeport, Connecticut, between twenty-five and thirty percent of workers are currently providing care for their parents. Experts expect that number will increase dramatically as the over sixty-five population, the fastest growing segment of the population, expands.

The American population is growing older, and elder care is becoming a serious corporate problem. Many corporations are using the EAP as a resource for assisting the company in developing and delivering elder care policies and programs. The EAP can also provide counseling for employees whose job performance has declined due to the stress of caregiving. Companies are now realizing that their employees need help in managing the emotional realities of caregiving. They are recognizing the need for a supply of available resources to successfully provide care for elders. With

advancements in medicine and technology, our loved ones will live longer, and the need for quality elder care services will increase.

All of these demographic changes bring to the forefront of the workplace issues that can be addressed by the EAP. EAPs can play major role in the ways companies respond to the evolving conditions of modern society.

COMPULSIVE GAMBLING

Our country has a long history of gambling. While recent statistical studies indicate that Americans are drinking less and have greatly reduced so-called "recreational" drug use, the trend for gambling has been in the opposite direction. In 1990, gambling was a \$241 billion business in the United States.

Compulsive gambling occurs across all populations at all levels of society. There are three phases of the disorder: the winning phase, the losing phase, and the desperation phase. Employers need to be especially concerned with desperation phase gamblers who have become involved in behavior such as theft, forgery or embezzlement to support their habit. Compulsive gambling is becoming more prevalent as more gambling sites become available across the United States. Efforts are now being made toward education and early intervention to reduce the incidence of compulsive gambling.

The rising recognition by society that gambling is a treatable addiction is reminiscent of the state of affairs in the alcoholism field in the 1950s. EAP professionals and public policy makers recognize the harmful consequences of

compulsive gambling and acknowledge a growing need for education and early intervention as the workplace is affected by this elusive problem.

VIOLENCE IN THE WORKPLACE

Violence and assault in the workplace is likewise becoming more common. It cuts across every occupational group. EAPs need to address the problem by promoting healthy lifestyles and healthy work relationships and attitudes in their organizations. An EAP can serve as a catalyst by providing a vehicle for the promotion of non-violent behavior in the workplace. EAPs need to be skilled at critical incident debriefing and in dealing with employees with post traumatic stress disorder.

SUMMARY

New societal trends and issues impact on the workplace. These challenges surface in work performance issues. EAPs clearly need to respond to the prevalent issues of the times by offering their skills and leadership as a resource to the workplace. This can take the form of consultation services to managers, special training sessions, or policy and procedure development.

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A. GLOSSARY OF TERMS

This appendix contains definitions of technical terms used in this manual. These definitions are intended to provide the reader with a general understanding of the concepts presented in this manual, especially as they apply to the EAP field. Please refer to the main text of this manual for clarification of the terms. Another helpful resource is *The Encyclopedia of Alcoholism*, a concise desk reference in dictionary format covering a myriad of topics relating to addiction. It was written by Robert O'Brien and Morris Chafetz and published by Green Spring, Inc., 1982.

GLOSSARY OF TERMS

ADDICTION	marked psychological and physiological dependence upon a substance, such as alcohol or a drug, which has gone beyond voluntary control.
AIDS	Acquired Immune Deficiency Syndrome: a disease caused by a virus that attacks the immune system. The virus infects the blood cells that help the body defend itself from infection and destroys them.
ALCOHOL	a liquid depressant which slows down physical responses and progressively impairs mental functions.
ALCOHOLIC	an individual whose consumption of alcoholic beverages or other substances with similar effects results in his becoming habituated, dependant, or addicted.
ALCOHOLISM	the excessive or prolonged use of alcoholic liquors to the extent of habituation, dependence or addiction.
ALCOHOLISM PROGRAM	a program designed strictly to help alcoholics with their addiction.
AMPHETAMINE	aminopropane, a colorless, volatile, mobile liquid, in common usage it acts as a central nervous system stimulant.
ASSESSMENT	a thorough evaluation conducted by an EAP counselor to determine an individual's psychological/emotional/social well-being.
BARBITURATES	a salt or ester of an organic acid used as a sedative or hypnotic.
CLINICIAN	one, who by virtue of their education and training, is qualified to provide counseling services.
CONFIDENTIALITY	a system of case coding that ensures the anonymity of each employee who participates in the EAP.
CONSORTIUM EAP	an EAP model that is operated by subscribing companies who share the costs and benefits of the EAP. The member organizations band together to hire an EAP provider and determine the specific services offered.

COUNSELING	professional guidance of individuals/families by utilizing psychological methods, especially using various techniques of the personal interview.
CURRICULUM VITAE	a brief account of one's career and qualifications prepared typically by an applicant for a position.
DENIAL	a common defense mechanism used by individuals experiencing drug or alcohol problems or other personal problems who do not want to admit they have a problem.
DETOXIFICATION	the process of withdrawing from a substance to which one is dependent, sometimes requiring medical supervision
DRUG	any substance which affects an employee's ability to perform his or her job or poses a threat to the safety of others.
DRUG ABUSE	a maladaptive pattern of psychoactive substance use that continues in spite of occupational, psychological, or physical problems caused or exacerbated by the drugs.
DRUG DEPENDENCE	a chronic disorder characterized by compulsive use of a substance resulting in adverse psychological, physiological, and social consequences that continues despite evidence of these adverse consequences.
DRUG-FREE WORKPLACE	places of employment that notify employees that is unlawful to manufacture, distribute, disperse, possess, or use controlled substances on the work site and specify the actions that will be taken against employees for the violation of such prohibition.
EAP	Employee Assistance Program: an employer or labor sponsored service designed to assist employees, and often their dependents in finding help for alcohol and other drug, mental health, family, health or personal problems.
EAP REFERRAL	an EAP recommended source of help or information.
EAP SUPERVISOR TRAINING	programs aimed at educating supervisors about the function of the EAP and their role as monitors of job performance.

EATING DISORDERS	disorders of food intake, body image, and weight regulation. These include more specifically: anorexia nervosa (self-starvation), bulimia nervosa (binge-purging behavior), and chronic obesity.
ENABLING	attempts to protect an individual from the consequences of his or her alcohol or drug use.
JOB PERFORMANCE	the amount of productivity and attitude of the employee on the job.
MANAGED CARE	a program designed to ensure that employees receive the quality of care they need in one cost effective system by providing a gatekeeper function and channel to mental health and substance abuse services.
MARIJUANA	the dried flower clusters and leaves of the hemp plant, especially taken to induce euphoria.
MENTAL HEALTH	a relatively enduring state of being in which an individual has effected an integration of his or her instinctual drives in a way that is reasonably satisfying and reflects his or her zest for living and feeling of self realization.
MOOD ALTERING SUBSTANCE	a drug which will turn your state of mind around and give you a new perspective.
NARCOTICS	a drug that in therapeutic doses diminishes sensibility, relieves pain, and produces sleep, but in large doses causes stupor, coma and convulsions.
NIDA	National Institute on Drug Abuse: the federal agency which has established the certification process for laboratories determining the results of drug and alcohol tests. It has a Toll-free Helpline: (800) 843-4971.
OCCUPATIONAL ALCOHOLISM PROGRAM	a program that focuses on early detection and intervention of alcoholism and drug abuse in a work setting.
PREFERRED PROVIDER NETWORK	qualified practitioners and facilities contracted for the treatment of mental health and substance abuse problems, specifically tailored to the needs of employees and family members.

PROBLEM DRINKER	one who may not yet be addicted to alcohol but is coming close to that point.
QUALITY ASSURANCE	a process of evaluating the effectiveness and efficiency of the EAP in terms of its structure, process, and outcome.
RELATIONSHIP PROBLEMS	difficulties encountered in one's interactions with significant others, including family members and co-workers.
SELF-REFERRAL	any employee who contacts the EAP on his or her own and receives assistance for personal problems.
SUBSTANCE ABUSE	maladaptive patterns of psychoactive substance use that have never met the criteria for dependence for that particular class of substance and is therefore a less severe version of dependence.
SUPERVISOR REFERRAL	when a supervisor suggests to the employee that he or she seek assistance for a problem which is usually related to job performance.
WELLNESS/HEALTH PROMOTION PROGRAM	a range of prevention oriented activities used to facilitate employees' adoption of personal behaviors that will enhance their health, fitness, and wellness.

B. SAMPLE EAP DOCUMENTS

This section of the Appendix is comprised of several documents designed to assist transit systems in the design, implementation, and evaluation of EAPs. The Flowchart for Developing an EAP provides a broad outline of the necessary steps involved in designing a program. The EAP Pre-Contract and Implementation Procedures describes, in greater detail, a sample timeframe for implementing an EAP. Several sample Requests for Proposals were designed to assist transit systems in the recruitment process. A variety of other forms, letters, surveys and handouts are included to assist transit systems at all stages of the process.

(SAMPLE)

**EMPLOYEE ASSISTANCE PROGRAM
CONSENT FOR RELEASE OF CONFIDENTIAL INFORMATION FORM**

I, _____, do hereby authorize the Employee
(Employee/Family member name)

Assistance Program to disclose the following information _____

(Extent and/or nature of the information to be disclosed)

to _____
(Name of person or program to whom disclosure is made)

for the purpose of _____
(Purpose or need for disclosure)

I understand that my records are protected under the Privacy Act of 1974 and the Federal Employee Alcoholism and Drug Abuse Confidentiality of Records Act (42 CFR Part 2). I understand that information about me cannot be disclosed without written consent unless otherwise provided for in the regulations. I also understand that I may revoke this consent at any time, except to extent that action has been taken in reliance on this informed consent. I understand that even if I do not withdraw consent, that this statement of consent shall automatically expire on the date indicated below:

(Specify date or circumstances under which consent will expire)

Signature: _____ Date: _____

(SAMPLE)

NEEDS ASSESSMENT EMPLOYEE OPINION SURVEY

1. Industry is increasingly aware of how employees' personal problems affect their work and other employees. Do you think any of your co-workers have any of the following problems? (Circle all that apply.)

<i>Marital</i>	<i>Family</i>	<i>Medical</i>
<i>Parenting</i>	<i>Legal</i>	<i>Gambling</i>
<i>Alcohol</i>	<i>Financial</i>	<i>Other</i> _____
<i>Drug Abuse</i>	<i>Psychological</i>	_____
<i>Stress</i>	<i>Emotional</i>	_____

2. Suppose you or another employee had any of the problems listed above. Where would you expect to get information about receiving help for this problem? (Circle all that apply.)

<i>Employee Meetings</i>	<i>Supervisor</i>
<i>Union</i>	<i>Co-worker</i>
<i>Company/Plant Nurse</i>	<i>Other</i> _____
<i>Personnel/Human Resources</i>	_____

3. What type of communications would best provide you with this information? (Circle all that apply.)

<i>Written Material/Brochures</i>	<i>Workshops/Seminars at Company</i>
<i>Posters</i>	<i>Films</i>
<i>Company Newsletter Articles</i>	<i>Staff Meetings</i>
<i>Company Benefits Booklet</i>	<i>Word of Mouth/Informal Conversation</i>

4. Of the following personal concerns, for which should the company offer help? (Circle all that apply.)

- | | | |
|-------------------|------------------|----------------------|
| <i>Marital</i> | <i>Stress</i> | <i>Psychological</i> |
| <i>Parenting</i> | <i>Family</i> | <i>Emotional</i> |
| <i>Alcohol</i> | <i>Legal</i> | <i>Medical</i> |
| <i>Drug Abuse</i> | <i>Financial</i> | <i>Gambling</i> |

Other areas such as prevention of problems, child abuse, child care, etc.

5. Have you heard of any company program which helps employees with these kinds of problems? (Check all that apply.)

	<i>Yes</i>	<i>No</i>	<i>Uncertain</i>		<i>Yes</i>	<i>No</i>	<i>Uncertain</i>
<i>Supervisor</i>	___	___	___	<i>Legal</i>	___	___	___
<i>Marital</i>	___	___	___	<i>Financial</i>	___	___	___
<i>Parenting</i>	___	___	___	<i>Psychological</i>	___	___	___
<i>Alcohol</i>	___	___	___	<i>Emotional</i>	___	___	___
<i>Drug Abuse</i>	___	___	___	<i>Medical</i>	___	___	___
<i>Stress</i>	___	___	___	<i>Gambling</i>	___	___	___
<i>Family</i>	___	___	___	<i>Other</i>	_____		

6. For those problems you answered YES in Question 5, what do you think the program does?

(SAMPLE)

**INVITATION FOR PROPOSALS
FOR
EMPLOYEE ASSISTANCE PROGRAM SERVICES**

This Request for Proposal (RFP) is an invitation to Providers to submit proposals for establishing and administering an Employee Assistance Program for the employees of the Company.

The Company employees consist of approximately # people functionally divided into administrative departments.

Employees are represented by five bargaining units and one residual non-represented group. Wages, hours, and working conditions are negotiated.

The establishment of an EAP is being considered on its own motion by the Company, with the knowledge of five unions.

The Company reserves the right to reject any and all proposals. Proposals must be submitted in the prescribed format as outlined in the RFP. Sealed proposals must be received by _____.

Copies of the RFP for Employee Assistance Program Services may be obtained by writing to _____.

REQUESTED SERVICES:

The Company is seeking proposals for establishing and administering an Employee Assistance Program for the Company. The following are five major areas of concern to the Company and the minimal level of services for each area on which the proposal will be evaluated. The Company is interested in obtaining the best services available at the most reasonable rate. Consequently, proposers should state in detail the services they offer, the costs involved, and the time it will take to implement the service and provide any other information that will assist the Company in evaluating the services offered.

1. Education and Training

Disseminate information to Company employees on implementation of the program. Inform employees and families of services available, how and where service would be provided, how to access services, how to pay for services, and likely scenarios of the process. Train designated personnel in techniques of identification and referral of employees who would benefit from services. Inform employees and families of program benefits, indications of program needs and follow-up available. Describe process for ongoing employee education within and without the workplace.

2. Implementation (Specify the Following)

Timeframe and process for bringing the program on-line. Professional staff and availability. Physical location of office/contact, and ease of availability for employee and family.

3. Accountability

Identify the process by which the provider will report program utilization while maintaining confidentiality of clients. Use reporting cycle and statistics available.

4. Insurance Integration

Identify how services beyond the immediate referral function would be coordinated with existing Company paid insurance plans. Each employee has selected on of the following health benefit plans:_____.

5. Network of Facilities and Specialists

Provide a listing and description of the specialists, facilities, and treatment centers utilized for employee referrals.

QUALIFICATIONS AND EXPERIENCE:

Proposers shall submit a statement of qualifications, summary of relevant experience and list of references. Factors to be considered are the qualifications and experience of principals and staff members, municipal and non-municipal experience and history of firm, and the ability of the firm to meet Company deadlines.

COSTS:

Provide a detailed statement of costs to the Company, per employee and/or on a per client contact with a minimum and maximum yearly cost per employee, and/or a flat fee together with its cost basis.

ADDITIONAL/OPTIONAL SERVICES:

Describe in detail related services or suggested options your firm provides and associated costs; e.g. wellness, pre-retirement, stress reduction programs, etc.

CONDITIONS AND PROPOSAL SUBMISSION:

Firms interested in providing the foregoing services shall submit two original signed proposals to the Purchasing Division of the Company no later than the time and date specified in the Invitation. Proposals received after this shall not be considered. By submitting a proposal, proposers agree that the specifications and provisions of the proposal shall become a valid contract between the Company and the bidder upon notice of award of the contract in writing.

The successful proposer shall be required to maintain adequate insurance coverage for errors and omissions and professional liability as well as adequate workers' compensation insurance.

EXCEPTIONS TO SPECIFICATIONS:

Proposers taking exception to any part or section of these specifications shall indicate such exceptions on their proposal. Failure to indicate such exceptions shall be interpreted as the bidder's intent to fully comply with the specifications as written. Conditional or qualified bids are subject to rejection in whole or part.

EXPENSES INCURRED IN PREPARING THE PROPOSAL:

The Company accepts no responsibility for any expense incurred in the proposal preparation and presentation, such expenses to be borne exclusively by the bidder.

BIDDER RESPONSIBILITY:

Before submitting a proposal, each proposer shall make all investigations and examinations necessary to ascertain all conditions and requirements affecting its full performance on the contract. Before submitting a proposal, each proposer shall make all investigations and examinations necessary to verify any representations made by the Company that the proposer will rely on. No pleas of ignorance of such conditions and requirements resulting from failure to make such investigations and examinations

will relieve the successful proposer from its obligation to comply in every detail with all provisions and requirements of the contract documents, nor will such claims be accepted as a basis for any claim whatsoever for any monetary consideration to the successful bidder.

AWARD:

Award of the contract shall be made to the responsible bidder whose proposal is determined in writing to be most advantageous to the Company, taking into consideration price and the evaluation factors set forth under the Requested Services Section in the RFP. No other factors or criteria shall be used in the evaluation. The contract file shall contain a recital of the basis on which the award has been made.

ADDITIONAL INFORMATION:

Questions regarding these specifications may be made in writing or by calling the Company.

(SAMPLE)

REQUEST FOR PROPOSALS
For
EMPLOYEE ASSISTANCE PROGRAM SERVICES

I. INTRODUCTION

A. Overview

The Transportation District Commission is seeking competitive proposals directly from qualified respondents to provide Employee Assistance services for its employees and family members. The services required are outlined in the Scope of Work which follows.

By submitting a proposal, you agree to perform the services according to the specifications outlined in the Scope of Work during the designated contract period. Renewal will be at the Commission's option.

B. Requirement of Intention to Provide Proposal

All potential proposers must respond, in writing, to the party outlined in Section C below of their intention to present a proposal no later than _____. Any amendments to the Request for Proposals will be given only to those responding parties. Further, proposals will only be accepted only from those same parties.

C. Deadline for Submission of Proposals

Each proposer should submit five (5) copies of the complete proposal and all attachments no later than _____.

The envelope should be clearly marked **EMPLOYEE ASSISTANCE PROGRAM PROPOSAL** and sent to the Transportation District Commission, c/o name, address, city, state, zip code.

Any requests for additional information or clarification of items within this RFP should also be directed to the party listed above.

D. Background

The Commission is a public transportation organization which provides public bus and specialized transportation services to the residents of _____. The Commission consists of seven (7) appointed Commissioners. Three (3) are appointed to represent each city and one (1) represents the Department of Transportation.

The Commission employs approximately _____ (#) employees _____ (#) full-time and _____ (#) part-time. Of this total, _____ (#) are unionized.

During the last four (4) years, the Commission has provided Employee Assistance services as outlined in this RFP for all full-time and part-time employees and their families.

II. SCOPE OF WORK

A. Purpose

The Commission recognizes that a wide range of problems not directly associated with an employee's job function can have an effect on an employee's job performance as well as their health. Therefore, the Commission and the Union believe it is in the best interest of the employee and the employee's family to provide a service which deals with such problems.

The primary goals of the Employee Assistance Program are (1) to afford employees and their families the opportunity to obtain assistance in resolving personal problems that have or may eventually have a negative effect on their work performance, and (2) to ensure that confidential and professional assistance is available to all employees and members of their families, if needed.

B. Specific Requirements

The Contractor will provide the following services without cost to the employee.

1. Assessment and referral services will be provided for employees and their family members who voluntarily seek assistance, and for those employees referred by management due to work performance problems.

Such services will address problems related to substance abuse, marital/family/interpersonal relationships, legal, financial, medical, stress, depression, grief, etc.

2. Short-term intervention counseling services (up to six (6) visits) will be provided. This will include individual, couple, or family therapy on an outpatient basis. If long-term intervention is indicated, referral would be required.

3. Monitoring and evaluation of the employee's progress after referral(s) and/or other treatment is recommended. In cases of management referrals, the provider will maintain communication with management regarding the employee's compliance with EAP and/or other provider recommendations.

4. A telephone number must be available on a 24-hour basis. In emergencies, an EAP representative should make face-to-face contact immediately. For non-emergencies, face-to-face contact should be made within 72 hours. Consideration should be given to persons who desire to make appointments outside normal hours of operation, due to the irregular working schedules of many of our employees. Also, we have a significant number of employees who are part-time and not entitled to sick or vacation leave time. Appointments should be scheduled so as to avoid breach of confidentiality.

5. The contractor will identify the location(s) where EAP services will be rendered. The site(s) must be in _____. Also, all site(s) must be located so as to minimize any possible breach of confidentiality.

6. The contractor must submit a listing of all service providers and locations, and identify any limitations with regard to services available, client populations, locations, etc. The list of service providers should include resources available to those employees without medical insurance and with limited financial means. The list should also state possible conditions where referrals to these providers may be indicated.

7. An employee or family member will be able to access contact with an EAP representative through several means of referral: self, peer, or supervisor.

8. The EAP will provide complete confidentiality to all participants. The contractor agrees not to use any person (professional or non-professional) who may be an employee, relative, or any other person who may present concern about confidentiality.

9. Upon contract award, the contractor will conduct orientation sessions to advise employees of EAP service and availability. Additionally, information will be provided annually on current topics such as substance abuse, stress, wellness, etc.

Also upon contract award, the contractor will develop and present specialized training for supervisors. This training will include information regarding the process for supervisory referrals. Training might also include up-to-date information on substance abuse problems and how they are manifested in the work place as well as other indicators of work performance that may be warnings of personal problems.

Due to the irregular work schedules of our employees, all orientation and training sessions must be conducted 2-3 times each, allowing for attendance by all employees.

10. Wallet-size cards are to be prepared and distributed to each employee with pertinent information including emergency or 24-hour telephone numbers. Brochures promoting EAP services are to be provided to all employees upon contract award and annually thereafter.

11. Monthly utilization reports will be submitted demonstrating the use of the program. Such report will include, at a minimum, participant status, numbers participating, sex, type of problem, type of referral, services provided, hours of service, etc.

12. The contractor will submit annual reports assessing participant satisfaction and/or dissatisfaction with EAP services and referral providers.

III. PROPOSAL REQUIREMENTS

A. Executive Summary

Should provide an overview of your organization and its capabilities to provide the services outlined in the Scope of Work above.

B. Background Information

Provide a brief description of your organization including:

1. Name and address of organization with listing of management structure

2. Organization chart

3. Name and resume of person(s) who will be directly responsible for management of this contract, and name and resume of person(s) who will be EAP contact for employees

Resumes should include areas of specialty, copies of professional licenses and/or credentials, and listing of professional association memberships.

4. Provide a list of all previous and current clients (public and private) for which you have provided EAP services. Include contact names and telephone numbers.

5. Three (3) letters of reference from current EAP clients, preferably locally based.

6. Description of EAP facilities, equipment, materials and supplies, etc.

C. Technical Information

In addition to the items listed above, your proposal should also include:

1. Narrative description of your organization's EAP philosophy and approach

2. Confidentiality policy statement

3. Plan for program design and service delivery; and plan for implementation to include orientation, supervisory training, etc.

4. Plan for annual supervisory training, employee education, and EAP promotions

5. Description of any recommended services for the Commission which may be in addition to those specified under the Scope of Work

6. Sample copies of utilization reports

7. Examples of promotional materials and any other forms or paperwork which would be used to provide services to our employees

8. A prototype copy of your contract/service agreement

9. A schedule of administrative costs with an explanation of cost basis (hourly fees, materials, direct and indirect costs, profit, etc.) and description of payment terms

10. Copies of current liability and malpractice insurance certificates.

IV. EVALUATION OF PROPOSALS

The Commission will evaluate all proposals received based upon the following criteria:

A. Completeness of response to the RFP requirements

B. Demonstrated experience, technical qualifications, and professional expertise required by proposed personnel to perform all requested services

C. Adequacy of referral sources (availability of providers for all services requested, location, etc.)

D. Clarity and responsiveness of philosophy and statement of confidentiality

E. Quality of program design, implementation plan, orientation sessions, supervisory training, annual education plans, and program materials

F. Sufficient time and personnel commitment

G. Availability and appropriateness of facilities and other resources to provide EAP services

H. Reasonableness of cost proposal

I. Results of oral presentation and tour of proposing EAP service facility. The Commission will select the three (3) most responsive proposals and schedule an oral presentation and tour of the proposer's EAP facilities.

(SAMPLE)

**REQUEST FOR PROPOSALS
for
EMPLOYEE ASSISTANCE PROGRAM SERVICES**

TO: MENTAL HEALTH PROFESSIONALS

FROM:

DATE:

RE: REQUEST FOR PROPOSAL FOR THE ESTABLISHMENT OF AN EMPLOYEE ASSISTANCE PROGRAM TO SERVE EMPLOYEES OF THE COMPANY

BACKGROUND

The _____ is an affiliate of the Transit Company. Over the past five years, it has developed a regional reputation for its comprehensive continuum of quality occupational health care. During that time, it has grown from a handful of companies and service offerings to over 250 corporate clients of various sizes and health needs.

Services offered by the company include Annual Histories and Physicals, DOT Exams, Inoculations, On-site Injury Treatment and Management, Biological Monitoring, Audiometric and Spirometric Testing, Employee Drug Screening and Environmental Safety Assessments.

Services currently being planned for the present and near future include the implementation of a Case Management Systems, the Occupational Rehabilitation of Injured Workers, a Comprehensive Educational Safety and Injury Prevention Series (including Wellness, Screenings, and CPR) as well as an EAP.

CLIENT SURVEY

During the past three months, all employees of the company were surveyed to assess their demographic makeup by age, sex, and white or blue collar work status. Researched was a determination of health promotional programs offered by the company to its employees as well as possible programs employees might like to see offered.

As a result of that survey and research, an assessment was made to determine the need for the type of future programs and services that are mentioned above.

An Employee Assistance Programs (EAP) was a service that had a high recognition factor among surveyed employees as one which was either being offered, in the planning stages, or in need of development.

The company believes that the addition of an EAP as a new benefit is consistent with the company's focus of providing the highest level of services with a minimal loss of time and money to the company.

BASIS AND DEADLINE FOR RFP

Over the past years, a number of EAP providers have approached the Administration of the company with the concept of providing EAP services to its employees. As a result, it has been determined that a Request for Proposal (RFP) be developed to compare suitability and match of interested EAP providers to the overall needs and long range goals of the company.

Therefore, it is requested that a proposal be submitted in writing to the attention of _____.

PARAMETERS OF REVIEW

The following parameters of review should be addressed in a proposal:

- I. **Background/Credentialing/Reference**
 - A. Background and credentialing of health care professionals and support personnel
 - B. Prior and current experience with EAPs
 - C. Listing of current and past EAP clients
 - D. Listing of three company management references (President/CEO, Director/V.P. Human Resources, Medical Director).

II. Past and Current EAP Experience

Describe the different types of EAPs offered to past and current companies which include the following:

- A. Number of clients served
- B. Hours of operation including off-hour coverage
- C. Services offered
- D. Limitations of services offered
- E. Accessibility to referral network for cases exceeding service or plan limitations
- F. Type of plan
 - a. Capitated visit plan
 - b. Guaranteed retainer based on hourly rate
 - c. Fee for service
- G. Average number of visits per client served under company EAP plan
- H. Of clients using EAP, average number of visits per client beyond allowed company EAP coverage
- I. Percentage estimate of case mix by work related stress disorders, problem resolution, alcohol and drug abuse, marital and family counseling, and situations referred on to psychiatric inpatient or outpatient therapy
- J. Billing arrangement with company client.

III. Proposed Program for Company EAP

Please address all criteria listed above in "Past and Current EAP Experiences" in proposing services to the company.

- A. Address how mental health professionals envision their relationship to the company (ie. independent contractor, employee, joint venture)
- B. In determining fee structure, address issues of who would assume responsibilities for marketing and sales of EAP, tracking employees who use the EAP, providing informational materials to employees, billings, collections, EAP administration, quality assurance and emergency coverage
- C. Determine pricing alternatives to company (cost vs. charge) based on capitated payments, fee for service, hourly rates, and possibly a joint venture arrangement.

(SAMPLE)

**REQUEST FOR PROPOSAL
for
EMPLOYEE ASSISTANCE PROGRAM SERVICES**

Purpose: To Provide Employee Assistance Program (EAP) Services to Company Employees.

Closing Date:

Place Due:

For Further Information Contact:

I. Purpose of Request for Proposal

The purpose of this Request for Proposal (RFP) is to solicit proposals to provide EAP technical and professional services for the Company.

II. Description of the Project

The Company, with an average population of (#) regular employees, is seeking to provide professional and confidential counseling and referral service to those employees experiencing personal problems. The Company is requesting a comprehensive, broad brush approach in the provision of diagnostic, treatment, referral, and follow-up activities to employees. Included in the program service is the basic training of company managers and supervisors in the purposes and uses of EAP.

III. Scope of Services

Provide EAP services including but not necessarily limited to the following:

- A. Provide confidential, professional and comprehensive diagnostic, counseling and referral services to any employee experiencing personal problems. The first session should be initially offered within a reasonable time frame from employee contact
- B. Program administration, record keeping, and reporting. Assignment of staff to administratively service the Company's EAP, maintain complete and confidential records and report quarterly to the Company on various program and utilization statistics
- C. Implement annual supervisory training sessions to Company supervisors in the function and uses of an EAP

- D. Communication and consultation with EAP staff by Company supervisors around non-confidential issues should the need arise
- E. Periodic development and provision of EAP informational materials to the Company workforce
- F. Provision of office space to provide necessary services.

IV. General Instructions

A. Proposal Content

Proposals must set forth full, accurate and complete information as required by the RFP and should:

1. Describe how the respondent will deal with each item outlined in the section of this RFP headed "Scope of Services". This applies even if it is the intent of the respondent to eliminate the item or to substitute some other activity in its place
2. Set forth an implementation plan specifying the staff credentials, capabilities, tasks to be performed, and relevant timetables for service
3. Provide budget breakdown and fee schedule
4. Provide original and five copies of proposal
5. Provide reference list and permission statement allowing the Company to contact references as needed
6. At the option of the respondent, include examples of no more than two relevant or similar projects provided by respondent. It is highly desirable that, if such material is submitted, it be in the form of a brief summary which includes a description of the customer, description of services provided by respondent, description of the methodology employed, and examples of reporting forms used.

V. Criteria for Evaluating the Proposals Received

Proposals will be evaluated by an Advisory Review Committee composed of management and employees of the Company. The prospective contractor will be selected principally on the following criteria, though not necessarily in this order of ranking:

- A. Offeror's proposed statement of work. Emphasis will be on soundness of approach, service provisions, previous experiences, and the quality of recommendations in meeting the Scope of Services.
- B. Capability for establishing working relationships. The personnel of this project must be able to work effectively with the management of the Company. Documentation of such previously successful relationships is preferred. Interviews with prospective contractors within competitive range may be conducted to provide input for this criterion.
- C. Background and previous experience of agency/personnel (including consultant and subcontractors) to be assigned to provide EAP services and their demonstrative competence in the type of work to be performed (include a complete resume and time commitment for professional persons to be assigned).
- D. Budget and fees.
- E. Organization and management. Consideration will be given to administrative, management, and program controls and the ability to commit staff and relevant resources to an EAP.
- F. Ability to satisfy minimum indemnification and insurance requirements as detailed under Section IX herein.

VI. Contract Requirements

A formal contract arrangement will be entered into with the EAP provider selected and the Company. The providers considered will be selected from responses to this RFP. Time period of contract shall cover one year.

VII. Compliance with Federal and State Laws

The provider shall comply with all applicable federal and state laws, rules and regulations, and will not discriminate or permit discrimination against any person or group of persons on the grounds of sex, race, color, age, religion, or national origin in any manner prohibited by law.

VIII. Acceptance Period

In submitting a proposal, RFP respondees agree that the proposal remain valid for a period of 60 days after the closing date for submission of proposal and may be extended beyond that time by material agreement.

IX. Indemnification and Insurance Requirements

- A. Indemnification - The EAP provider agrees to defend, indemnify and hold harmless the Company, and its employees from any claims, liabilities and obligations, and cause of action of whatsoever kind and nature for injury to or death, including employees of the provider, or any person and for damages to or destruction of property, or loss of use, including property of the Company, resulting in connection with services performed under this agreement regardless of cause except that provider shall not be required to assume responsibility or indemnify company for such injuries, damages or claims deemed by law to be due to the sole negligence of the Company, or its employees.
- B. Insurance Requirements - The EAP provider agrees to procure and maintain in effect for the duration of this agreement the following insurance coverage with insurers licensed or approved to conduct business in the State and holding a current financial rating satisfactory to the Company.
1. Professional Legal Liability - Insuring against claims on suits brought by employees alleging injuries or damages, including claims brought directly by the Company, due to errors and omissions and deemed to have arisen out of work or services performed under this agreement. Coverage shall be broad enough to include:
- a. Contractual Liability
 - b. Contingent Liability

Claims Made Policy - Shall provide for not less than 12 month discovery period or agreement that coverage will be renewed for a period of not less than 1 year, such completion of work or services under this agreement. In the event the Company requires coverage beyond such extension, it will retain the right to implement such requirement prior to expiration of existing coverage as specified above.

2. Commercial General Liability - Insurance against claims or suits brought by employees alleging bodily injury or damages of property and claimed to have arisen out of services provided under this agreement. Coverage shall be broad enough to include:

- a. Premises and Operations
- b. Contingent Liability
- c. Contractual Liability

Limits of Liability - Shall not be less than \$1,000,000 for coverage under 1 and 2 above.

Additional Named Insured - Naming the Company as an additional insured.

Knowledge of Occurrence - Standard Wording

Notice of Occurrence - Standard Wording

- 3. Workers Compensation and Employers Liability - Insuring in accordance with statutory requirements in order to meet obligations toward employees in the event of injury or death sustained in the course of employment. Employers Liability (Coverage B) shall not be less \$100,000 each claim.

Policies under 1, 2, and 3 shall be endorsed to include the following:

Notice of Cancellation - In the event of non-renewal or cancellation provider's insurer shall give written notice to the company indicating that such cancellation or non-renewal shall not be effective in less than 60 days from date notice is received by registered mail.

Certificate of Insurance - Prior to start of work or operations under this agreement or contract, a properly authorized certificate of insurance evidencing that the above described coverage is in effect including the required minimum notice of cancellation with elimination of the verbiage "will endeavor". Further, prior to acceptance, the certificate shall clearly show:

- a. Description of operations of EAP technical and professional services
- b. Location to be citywide
- c. The Company is included as an additional insured.

(SAMPLE)

PLANNING INSTRUMENT FOR DEVELOPING AN EAP

PROGRAM DEVELOPMENT TASK	ESTIMATED DATE OF COMPLETION	DEADLINE	ACTUAL DATE OF COMPLETION
EAP Determine specific need for an EAP •Contact, select and contract with consultant			
Survey of existing conditions •Do needs assessment •Conduct organizational and employee information surveys.			
Once surveys are completed, you should be able to answer these questions: <i>Do employees see problems?</i> <i>How many do?</i> <i>What kinds of problems?</i> <i>What are some illustrative statements?</i> <i>How do employees tend to deal with troubled colleagues?</i> <i>What are the normal procedures for dealing with troubled employees in your company?</i> <i>(Draw a flowchart)</i> <i>Where is waste occurring?</i> <i>Would the people you have spoken with be receptive to an EAP?</i>			
Advisory Committee •Identify key people •Schedule meetings			
Define program scope •Target dates performance criteria			

(SAMPLE)

PLANNING INSTRUMENT FOR DEVELOPING AN EAP

PROGRAM DEVELOPMENT TASK	ESTIMATED DATE OF COMPLETION	DEADLINE	ACTUAL DATE OF COMPLETION
Policy and procedural statements <ul style="list-style-type: none">• Draw up list of possible components of a policy statement• Draw up final draft of policy statement• Have program advisory committee approve final policy statement• Submit procedural statement to advisory committee• Complete final procedural statement, including additions and deletions mandated by advisory committee			
The RFP/Request For Proposal <ul style="list-style-type: none">• Determine specific needs for service• Decide on times which services will be available• Decide on location• Identify program model that best responds to the needs of the company• Develop RFP/contact potential providers• Bidders conference• Gather responses to RFP• Select provider and contract			
Orientation and training (O&T) <ul style="list-style-type: none">• Scheduling plan			
Develop program promotional and publicity strategies			

(SAMPLE)

**EMPLOYEE ASSISTANCE PROGRAM
POLICY AND PROCEDURE**

POLICY

The company recognizes that a wide range of problems not directly associated with one's job function can have an effect on an employee's job performance. In most instances, the employee will overcome such personal problems independently and the effect on job performance will be negligible. In other instances, normal supervisory assistance will serve either as motivation or guidance by which such problems can be resolved, so that the employee's job performance will return to an acceptable level. In some cases, however, neither the efforts of the employee nor supervisor have the desired effect of resolving the employee's problems, and unsatisfactory job performance persists over a period of time, either constantly or intermittently.

The company believes it is in the interest of all employees, the employee's family, and the company to provide an employee service which deals with such persistent problems. Our company is pleased announce that it has adopted an EMPLOYEE ASSISTANCE PROGRAM as a practical and constructive mechanism for dealing with employees' personal problems which affect the work situation, or as an aid to those employees and their family members who voluntarily wish to use the program as a means of resolving a personal problem.

The program is being offered to all full-time permanent employees and permanent members of their immediate household. It is the company's policy to handle such problems within the following framework.

PROCEDURE

1. The general purpose of the program is to assure that any employee having a work hampering personal problem will receive careful consideration and an offer of confidential professional assistance. The company recognizes that almost any human problem can be successfully treated, provided it is identified in its early stages and referral is made to an appropriate professional. This applies whether the problem be one of physical illness, mental or emotional illness, finances, marital or family discord, alcoholism, drug abuse, legal problems, or other concerns.

2. Employees who have a problem which they feel may affect work performance are encouraged to voluntarily seek counseling and information from our EAP Coordinator

on a confidential basis by contacting the Coordinator at the number shown on the brochure.

3. When an employee's job performance or attendance is unsatisfactory and the employee is unable or unwilling to correct the situation either alone or with supervisory assistance, this is an indication that there may be some cause outside of the realm of his job responsibilities which is the basis of this problem. In these cases, employees may be referred to the program by their supervisor and may be requested by the company to secure adequate medical, rehabilitative counseling, or other services as may be necessary to resolve their problem. If assistance is accepted, it will be the employee's responsibility to comply with the referrals for diagnosis of his or her problem and to cooperate and follow the recommendations of the diagnostician or counseling agent. An employee's continued refusal to accept help and/or treatment will be handled in the same way that similar administrative problems are presently handled when there is a job performance issue. However, the decision to accept assistance through the Employee Assistance Program is the personal choice of the individual, and any cost incurred will be the employee's responsibility.

4. Employees referred to and participating in the Employee Assistance Program will be expected to meet existing job performance standards and established work rules.

5. The records of the Employee Assistance Program will be maintained by Human Resources. All records pertaining to the Employee Assistance Program will be treated with the highest degree of confidentiality accorded to Medical Records. EAP records will not be disclosed to anyone other than the employee or family member involved, except under a court order compelling disclosure or a duly signed Release of Information Form.

6. Voluntary self-referred employees or family members seeking assistance will be able to do so with complete anonymity.

7. Expenses incurred for diagnosis and treatment of alcoholism, drug abuse, and physical or psychiatric problems may be reimbursed in accordance with the provisions of the Group Insurance Program applicable to all eligible employees.

8. Implementation of the policy will not require, or result in, any special regulations, privileges or exemptions from standard administrative practices. This program is not intended to supplant the normal disciplinary process.

9. By utilizing this service, the employee is assured that his/her job advancement opportunities will not be jeopardized, provided that the causes of the declining work performance are corrected.

(SAMPLE)

EAP PRE-CONTRACT AND IMPLEMENTATION PROCEDURES

TIME FRAME	PROCEDURE	WHO
	Pre-Contract	
Within 1st week of co. verbally agreeing to contract with EAP provider	1. Establish start date.	Mktg. person/ Contract Mgr.
	2. Review budget with department head and controller.	Contract Mgr.
	3. Verbally finalize contract with client company and get final employee count.	Contract Mgr.
	4. Begin contract procedures with EAP consultants (when appropriate). Refer to Contract Procedures for consultants.	Contract Mgr.
	5. Contract to administrative staff for contract preparation.	Contract Mgr.
	6. Note to bookkeeping to attach invoice to contract and cover letters at time of mailing.	Contract Mgr.
	7. Proof, obtain signatures and mail.	Contract Mgr./ Secretary
	Implementation	
Week 1 (Allow a min. of 6 weeks from start date for implementation)	1. Contract Manager to develop "proposed Implementation Plan."	Contract Mgr.
	2. Emergency counseling available as needed through Medical or Personnel Dept. (Regular counseling services to be made available following home mailing of brochure to employees announcing the program--allow a minimum of 6 weeks.)	Contract Mgr.
	3. Meeting with company EAP Coordinators at _____. Send letter in advance with agenda.	Contract Mgr.

Meeting Agenda:

- A. Review Implementation Plan (schedule training and orientations).
- B. Review "draft" EAP policies and procedures.
- C. Review Promotional Plan: EAP brochures, wallet cards, etc.
- D. Review sample announcement letters.
- E. Discuss statistical reporting system and company specific information to be gathered within the EAP providers guidelines for "Job Category" and Dept." (only). Information to be given to Accounting Dept. for computer and to all EAP counselors.
- F. Company representatives to meet the EAP provider employees (i.e., Contract Managers).
Meeting is to be held at _____.
- G. Company to provide the EAP with:
 - ___ 1. Name and phone number of company representatives who handle insurance benefits. Also name and phone number of insurance representative.
 - ___ 2. ALL health insurance information: HMOs, pre-administration criteria, etc.
 - ___ 3. Benefits (sick time, long-term disability, etc.)
 - ___ 4. Disciplinary procedures.
 - ___ 5. Pertinent company policies (i.e. alcohol/drug, AIDS, etc.).
 - ___ 6. Drug testing protocol.

TIME FRAME	PROCEDURE	WHO
Week II	1. Set up internal system for contact needs if unique to current system.	Contract Mgr. & EAP staff
	Company Start-Up:	
	1. Senior management briefing.	Contract Mgr.
	2. Union briefing (when applicable).	Contract Mgr.
	3. EAP brochure to printer or provider.	Company EAP Coordinator
	4. Final draft of EAP policies and procedures reviewed.	Contract Mgr. & Company EAP Coordinator
Week III	1. EAP policies and procedures approved and distributed to appropriate managers.	Company EAP Coordinator
Week IV	1. Supervisor/Management Training sessions held.	Contract Mgr.
	2. EAP announcement letter (signed by company president) and brochures mailed to employees' homes.	Company EAP Coordinator
Week V & VI	1. EAP Employee Orientation sessions conducted on-site (20-30 minutes each to groups of 50+).	EAP Counselor
Week VI	1. EAP posters placed in selected visible areas (one year supply provided).	Contract Mgr. to supply; Company EAP Coordinator to put up
Third Week Following End of First Quarter	1. EAP Quarterly Report submitted and meeting held with company representatives.	Contract Mgr.
	2. Orientation of new hires - quarterly.	EAP Counselor
	3. Develop EAP Promotional Plan for remaining first year of service.	Contract Mgr. and Company EAP Coordinator

(SAMPLE)

**OUTLINE-SUPERVISOR TRAINING
FOR THE EMPLOYEE ASSISTANCE PROGRAM
(Two to Four Hour Presentation)**

- I. Introduction**

- II. The Employee Assistance Program: Objectives, Policy, Principles, Procedures**
 - A. Definition of EAP
 - B. Brief History of EAPs
 - C. Rationale of EAP
 - D. Objectives of EAP
 - E. Company Policy
 - F. Eligibility
 - G. Cost
 - H. Definition of Personal Problems
 - I. Ethical Principles
 - J. Procedures
 - 1. Types of Referrals to EAP
 - 2. The EAP Interview
 - 3. Follow-Up
 - 4. Confidentiality
 - 5. EAP Records
 - K. Key Contacts

III. Film: "The Troubled Employee"

- A. View and Discuss
- B. Clarify Film Disclaimers

IV. Supervisor's Role

- A. Supervisor as Key to EAP Success
- B. Supervisor's Role in EAP Process
- C. EAP as Job Performance-Based Program
- D. Signs of Deteriorating Job Performance
- E. Stages of Supervisor Response
- F. EAP as an Additional Avenue for Supervisors
- G. What You Should Do
- H. What You Should Not Do
- I. Common Traps
- J. Feedback and Follow-Up
- K. EAP Counselor as Consultant to Supervisor

V. Summary

VI. Training Evaluation

(SAMPLE)

**OUTLINE-EMPLOYEE ORIENTATION TO
THE EMPLOYEE ASSISTANCE PROGRAM**

(One to Two Hour Presentation)

- I. **Introduction**
- II. **The Employee Assistance Program: Objectives, Policy, Principles and Procedures**
 - A. Definition of EAP
 - B. Rationale of EAP
 - C. Four Objectives of EAP
 - D. Policy
 - E. Eligibility
 - F. Cost
 - G. Definition of Personal Problems
 - H. Principles
 - I. Procedures
 - 1. Types of referrals into EAP
 - 2. The EAP interview
 - 3. Follow-up
 - 4. Confidentiality
 - 5. EAP records
 - J. Whom To Contact

(SAMPLE)

LISTING OF EMPLOYEE SEMINARS

The following seminar topics can be presented to employees to inform, educate and encourage participation in the EAP. Often they can be conveniently scheduled during the lunch hour as informal "brown bag" seminars or after hours.

Please check any seminars you would be interested in attending:

- Single Parenting
- Parenting Adolescents
- Step Families
- Parenting Children of Divorce
- Drug and Alcohol Awareness
- Adolescents and Substance Abuse
- Aging Parents
- Sandwich Generation
- Pre-Retirement Planning
- Effective Communication
- Human Sexuality
- Stress Management
- Over-eating and Weight Problems
- Time Management
- AIDS Awareness

Other seminars can be developed upon request. Suggestions: _____

(SAMPLE)

SCOPE OF SERVICES FOR AN EAP PROVIDER

The following are the minimum services/qualifications required of an outside Employee Assistance Program for approximately 800 employees.

1. Consultant will provide a minimum of three (3) one hour counseling and/or assessment sessions per year to each employee and family member. (For example, a family of three would be entitled to nine (9) sessions per year if all members participated.) "Family member" shall include employee's spouse and dependent unmarried children under the age of 19 (up to age 23 if a full-time student). While it is anticipated that assessment and referral will be primary, short-term counseling must also be available as a part of the prepaid service. Consultant will follow-up with all clients using the aforementioned services for twelve (12) consecutive months to ensure follow-through and satisfaction of the services provided.
2. If ongoing counseling is deemed necessary by Consultant, Consultant will refer Client to outside agencies in the Client's community. Referrals should be made with regard to appropriateness of resource specialty, location, cost, and availability. In the event of an outside agency referral, Consultant must follow-up with the Client and outside agency for twelve (12) consecutive months following the referral to ensure thorough case management, follow-through and the Client's satisfaction with the outside agency's services.
3. Consultant will provide designated Human Resources staff with unlimited telephone discussion(s) regarding the operation of the Employee Assistance Program and will meet with such staff as required.
4. Consultant will assist the company in developing policies and procedures in the use of the Employee Assistance Program. Consultant will also assist in developing policies regarding problems that affect job performance. Consultant's staff will meet, as required, with Human Resources staff who will inform Consultant's staff about insurance benefits available to employees.
5. Consultant will provide the company with promotional materials such as posters, wallet cards, and brochures designed to communicate the program and encourage employee self-referrals. Additionally, the Consultant will assist Human Resources staff in developing internal promotional materials to supplement the EAP provider's materials.

6. Consultant's staff must include counselors with professional specialties aimed at treating a broad range of life management problems. For example, the staff must be comprised of a certified alcoholism/drug addiction counselor(s), family/marital specialist, adolescent behavior specialist(s), etc. Resumes of assigned staff must be provided as part of the written proposal.
7. Consultant must provide quarterly and year-end demographic and utilization summary report to the company and must meet with designated Human Resources staff each quarter to present such utilization data, discuss EAP participation, and provide insight into experienced trends. As part of this report, Consultant must provide to the Human Resources EAP Administrator information that reflects participating employees' satisfaction or dissatisfaction with the EAP services rendered.
8. With the written consent of the Client, Consultant must provide ongoing case consultation with the designated Human Resources personnel in the event of a supervisory or Human Resources referral.
9. Consultant must make services available to employees six (6) days/week, Monday through Saturday, with evening hours until 9 p.m. available at least three (3) of these days. Services must be provided in a convenient location(s) within the County. If no other arrangements can be made, the Consultant must also be willing to schedule appointments at other locations or at company facilities, on rare occasions, as employees' erratic work hours might dictate.

If Consultant changes counseling sites or hours of availability during the contract period, the Consultant must notify the company at least sixty (60) days prior to any change. The company reserves the right to evaluate acceptability of these changes and cancel the contract with thirty (30) days written notice.

10. Consultant will provide employees/family members with access to a twenty-four (24) hour emergency hotline, providing them telephone access to a counselor within minutes. This service will be provided three hundred sixty-five (365) days a year. An appointment will be made with employee/family members within twenty-four (24) hours of request in emergency cases and five (5) working days of request in non-emergency situations.
11. Consultant must provide all diagnostic tests necessary for employee assessment.
12. Consultant must contact the Human Resources designees and appropriate Police Department in cases requiring "legal duty to warn" when the employee being treated represents a danger to self and others.

13. All employees and interested family members may attend voluntary orientation sessions during the first month of the contract. At these sessions the Consultant's staff will provide an overview of the program and how it operates (Up to four {4} sessions).
14. Two (2) supervisory training sessions will be provided. This program will focus on identifying job performance indicators and on motivating employees to seek outside help. A strong emphasis will be placed on using the EAP service as a management tool. A brief written guide will be provided to all supervisors.
15. Each quarter, Consultant will provide employees with a one-hour educational workshop pertaining to mental health topics of interest. Such workshops shall be conducted on property. Upon request, Consultant will provide additional on-site educational workshops at additional cost.

THE COMPANY WILL PROVIDE THE FOLLOWING SERVICES

1. The company will provide adequate space and facilities for the planning and implementation of Employee Assistance Program development meetings, group orientation sessions, individual conferences, and workshops.
2. The company will schedule and notify participants of meetings or workshops.
3. The company will handle distribution of materials necessary for the promotion and maintenance of the Employee Assistance Program. For example, a brochure of program introduction will be sent to the home of each employee and appropriate descriptive information introducing the Employee Assistance Program's policies and procedures to each supervisor.
4. The company will designate an employee or employees to coordinate the Employee Assistance Program, representing the company in day-to-day contacts with the Consultant, and receive the quarterly demographic and utilization summary reports.
5. The company will provide to Consultant, at least semi-annually, a list of employees eligible to participate in the Employee Assistance Program.

(SAMPLE)

LETTER TO EMPLOYEES AND FAMILY MEMBERS
TO INTRODUCE THE EAP

Dear Employees and Family Members:

I am pleased to announce that a significant new benefit has been added to the (*your company name*) benefits package.

Full-time salaried and hourly employees and their dependents can now receive confidential assistance with personal problems from professional counselors through the EMPLOYEE ASSISTANCE PROGRAM (EAP). The EAP is operated by an independent company completely separate from (*your company name*). This company, (*EAP provider name*), has a counseling office in (*name of city*).

Employees and family members can contact the counselor by using a toll free number and arrange for a confidential interview to assess problems such as marital, alcohol or drug abuse, emotional, legal, financial, stress or any other issue affecting his/her well-being. Supervisors can also utilize the EAP to help employees whose personal problems affect job performance.

This service is pre-paid by (*your company name*). Usually the counselor can help you identify the problem and develop a plan to resolve it in one to three sessions, for which there is no charge. If referral to a community resource is made, your Health Plan will, in most cases, cover the majority of the cost.

No information about your use of the service will be conveyed to the company personnel, if you seek help on your own. Simply call the 24-hour help line to talk with a professional counselor.

Further details on this program will be provided to you over the next several months through employee orientation sessions, posters and brochures distributed to employees. If you would like to discuss this program, please feel free to call (*name of person*) in personnel or the EAP provider company (*EAP provider name and number*).

We hope you and your family will use this program. We believe it is a valuable addition to our employee benefits package.

Sincerely,

(*name and title*)

(SAMPLE)

**LETTER TO EMPLOYEES AND FAMILY MEMBERS
TO INTRODUCE THE EAP**

Dear Employees and Family Members:

(Company name) recognizes that most people at sometime in their lives experience problems which seem too overwhelming or painful to be solved alone. Many times problems we face can be resolved with assistance from a professional who can provide an objective assessment and referral plan for problem resolution.

To help employees and their families address these difficulties, we are pleased to announce a new employee benefit called the Employee Assistance Program (EAP). The EAP provides a free, confidential counseling and referral service to employees and their families who may be experiencing personal problems such as marital, family, or emotional conflicts, alcohol or drug abuse, legal or financial difficulties.

In order to provide the broad range of professional counseling services, we have contracted with ***(EAP provider name)***, a professional EAP firm. Through this organization, ***(your company name)*** is able to insure that employee participation in the program will remain confidential.

The program and services provided are described in the enclosed brochure. We encourage you to carefully review it with your family.

Sincerely,

(name and title)

EAP Program: Steps for Assistance

FINANCIAL
PROBLEMS

FAMILY
PROBLEMS

MARITAL
PROBLEMS

CONFLICT
RESOLUTION

STEP ONE: RECOGNITION OF PERSONAL PROBLEM

Few of us escape serious personal problems during our lifetime. No one is totally immune from the problems of daily living, or a personal crisis which can harm us personally while affecting our health and human relations. The first step is to recognize that a problem is interfering with normal daily living.

STEP TWO: EARLY IDENTIFICATION

All employees are encouraged to call for an appointment as early as possible. You do not need to wait until you have a big problem before calling the EAP. We have provided the EAP as a benefit to you to assure that you maintain a satisfactory level of health.

STEP THREE: PROFESSIONAL ASSISTANCE

We are interested in your well-being and recognize that an employee's personal problems will sometimes require the aid of a professional. The EAP representative will work with you and/or members of your family to identify the problem. Once the problem has been identified, the EAP counselor will suggest a plan of action to solve the problem. Sometimes this plan includes a referral to community-based counselors.

STEP FOUR: WELLNESS

To maintain your health and well-being which has been restored by seeking personal assistance, the EAP will provide resources to assure your continued good health. Exercise, special weekend retreats and other such resource information is available through the EAP.

DRUG
PROBLEMS

WORK
STRESS

ALCOHOL
PROBLEMS

EMOTIONAL
PROBLEMS

WHEN YOU
NEED A LAWYER

*Courtesy of SCAT
(South Coast Area Transit)*

CLIENT DEMOGRAPHICS FORM

The Client Demographics Form on the following page is used at the initial visit to gather client information. Some systems suggest triplicate copies so that the counselor's confidential information about the client can be maintained separately from the data forwarded to the computer system. The information from this sample form would be compiled to provide the basis for the program statistics, tracking, and evaluation procedures.

CLIENT DEMOGRAPHICS

XX FOR OFFICE USE ONLY XX

FACILITY #:

Grid for Facility #

COUNSELOR #:

Grid for Counselor #

REPORT MONTH

Grid for Report Month

MONTH - YEAR

COMPANY NAME:

FACILITY:

LOCATION:

COUNSELOR NAME/AGENCY NAME:

CLIENT IDENTIFICATION:

Client # grid

Job Position:

Work Phone #:

Work Phone # grid

Home Phone #:

Home Phone # grid

CASE STATUS:

Case Status grid

- 1. New Entry
- 2. Reopen

OPEN/RE-OPEN DATE:

Open/Re-open date grid

HEARD OF EAP:

Heard of EAP grid

- 1. Poster
- 2. Training/Orientation
- 3. Workshop
- 4. Homecalling/Printed Materials
- 5. Co-Worker
- 6. Supervisor
- 7. Union
- 8. Human Resources
- 9. Family

CASE STATUS:

Case Status grid

EMPLOYMENT STATUS:

Employment Status grid

- 1. Full-time
- 2. Part-time

JOB CATEGORY:

Job Category grid

DEPT.:

Dept. grid

COUNSELING LOCATION:

Counseling Location grid

- 1. On-Site
- 2. Off-Site
- 3. Corporate Only
- 4. Hartford (Specify)
- 5. Enfield

SEX:

Sex grid

- 1. Male
- 2. Female

AGE:

Age grid

- 1. 00-19
- 2. 20-29
- 3. 30-39
- 4. 40-49
- 5. 50-59
- 6. 60-69
- 7. 70+

MARITAL STATUS:

Marital Status grid

- 1. Married
- 2. Separated
- 3. Divorced
- 4. Widowed
- 5. Never Married

UNION:

Union grid

- 1. Yes
- 2. No

CLIENT STATUS:

Client Status grid

- 1. Employee
- 2. Fam. Memb

TYPE OF REFERRAL:

Type of Referral grid

- 1. Self
- 2. Company Sugg
- 3. Job Performance Referral

REFERRAL SOURCE:

Referral Source grid

- 1. Self/Family
- 2. Supervisor
- 3. Human Resources (ER, IR Pers)
- 4. Medical
- 5. Union

ETHNIC ORIGIN:

Ethnic Origin grid

- 1. Cauc.
- 2. Black
- 3. Hispanic
- 4. Oriental/Asian
- 5. Other

EDUCATION COMPLETED:

Education Completed grid

- 1. Grade School
- 2. Some High Schl
- 3. High Schl Grad
- 4. Some College
- 5. College Grad
- 6. Some Grad Schl
- 7. Graduate Degree

PROBLEM CATEGORY:

Problem Category grid

- 01. Alcohol
- 02. Drug Abuse
- 03. Fam Memb; Drg/Alc
- 04. Psych/Emotnl
- 05. Medical
- 06. Marital/Rel
- 07. Family/Child
- 08. Financial
- 09. Legal
- 10. Gambling
- 11. Weight/Eatg Disorder
- 12. Job/Career/Voc

COUNSELOR ACTION:

Counselor Action grid

- 1. EAP Only
- 2. EAP & Ref

URGENCY:

Urgency grid

- 1. Crisis
- 2. Non Crisis

DISPOSITION AT CLOSE OF CASE FILE:

Disposition at Close of Case File grid

- 1. Resolved
- 2. Improved
- 3. Unimproved
- 4. Declined Recommendation

FEEDBACK CARD:

Feedback Card grid

- 1. Handout in person
- 2. Mailed
- 3. Not Possible

DISPOSITION AT CLOSE OF CASE FILE:

Disposition at Close of Case File grid

- 01. Alcohol
- 02. Drug Abuse
- 03. Psych/Emotnl
- 04. Medical
- 05. Marital/Rel
- 06. Family/Child
- 07. Financial
- 08. Legal
- 09. Gambling
- 10. Weight/Eatg Disorder
- 11. Job/Career/Voc
- 12. Self Help
- 13. EAP ONLY

OUTPATIENT:

Outpatient grid

- Primary
- Secondary

SERVICE UTILIZED:

Service Utilized grid

- Inpatient
- 1. Alcohol
- 2. Drug
- 3. Psychiatric
- 4. Medical
- 5. Other

SESSIONS AND ATTENDEES:

Sessions and Attendees grid

DATE HOURS

PHONE CONTACTS AND FOLLOW-UP:

Phone Contacts and Follow-up grid

DATE HOURS

CLIENT OR FAMILY:

Client or Family grid

PHONE TOTAL

JOB (HR, Sup, Med., Union):

Job (HR, Sup, Med., Union) grid

RESOURCES:

RESOURCES:

Resources grid

CONTACTS HOURS:

Contacts Hours grid

CONTACTS HOURS:

Contacts Hours grid

PHONE TOTAL

EAP Customer Service Evaluation (for Employees and Family Members)

EAP Coordinator : _____

ETP Contract Manager : _____

Company : _____

Location : _____ Date: _____

	excellent	good	satisfactory	needs improvement	unsatisfactory	N/A
EMPLOYEE RELATED SERVICES						
1. Availability of EAP Counselor(s) to employees	6	5	4	3	2	1
2. Responsiveness of EAP Counselor						
- To your needs and the needs of managers/supervisors	6	5	4	3	2	1
- Returns phone calls	6	5	4	3	2	1
- Prompt for meetings	6	5	4	3	2	1
3. Your perception of the overall confidentiality of EAP at your company	6	5	4	3	2	1
4. Ability of EAP Counselor to assist employees and managers to resolve problems	6	5	4	3	2	1
5. Frequency with which supervisors utilize EAP services to assist them in dealing with troubled employees	6	5	4	3	2	1
TRAINING/PROMOTION						
1. Quality of EAP Supervisory Trainings	6	5	4	3	2	1
2. Frequency of EAP Supervisory Trainings	6	5	4	3	2	1
3. Quality of EAP Promotional Activities						
- Topics/Workshops/Seminars	6	5	4	3	2	1
- Posters/Pamphlets/Wallet Cards/Paycheck Stuffers	6	5	4	3	2	1
- Employee Orientations	6	5	4	3	2	1
ACCOUNT SERVICE						
1. Availability of your provider Contract Manager	6	5	4	3	2	1
2. Visibility of the EAP to employees (i.e., workshops, posters, newsletter articles, etc.)	6	5	4	3	2	1
3. Quality/timeliness of the Quarterly/Annual Demographics Report	6	5	4	3	2	1

COMPANY EAP CONTACT PERSON SURVEY

	Very True	Mostly True	Sometimes True	Occasionally True	Rarely True	Never True
<u>Accessibility</u>						
1. The person(s) overseeing my account is/are frequently available to respond when needed.	5	4	3	2	1	0
2. My calls are returned within a reasonable period of time.	5	4	3	2	1	0
3. When I contact the EAP, I am connected with the person I am calling within a reasonable amount of time.	5	4	3	2	1	0
4. When I call the provider, I am treated politely and with respect by its staff.	5	4	3	2	1	0
5. The EAPs operating hours are conducive to my needs.	5	4	3	2	1	0
6. During non-business hours, I feel confident that the answering service/system is reliable and responsive.	5	4	3	2	1	0
Comments regarding this question:						
<hr/>						
<hr/>						
<hr/>						

Responsiveness

1. When I call the provider and the person I call is unavailable, other staff members are accommodating.	5	4	3	2	1	0
2. I can generally schedule meetings and appointments with staff within a reasonable period of time.	5	4	3	2	1	0
3. It is not often that meetings or appointments arranged with staff must be canceled or rescheduled due to conflicts in the staff's schedules.	5	4	3	2	1	0
4. When I need information from the provider, I generally receive it within the requested time frame.	5	4	3	2	1	0

	Very True	Mostly True	Sometimes True	Occasionally True	Rarely True	Never True
5. In urgent situations, I can rely on an immediate response.	5	4	3	2	1	0

Quality of Training/Education Materials

1. The quality of training/ education materials meets my needs and expectations.	5	4	3	2	1	0
--	---	---	---	---	---	---

Quality of Training Programs, Conferences and Other Events

1. The content of the training programs and conferences is valuable to my company's needs.	5	4	3	2	1	0
--	---	---	---	---	---	---

2. The quality of the speakers and presenters meets my expectations.	5	4	3	2	1	0
--	---	---	---	---	---	---

3. Training programs, conferences and other events are well-organized and make good use of the time allotted for these programs.	5	4	3	2	1	0
--	---	---	---	---	---	---

4. The overall quality of the EAPs training programs, conferences, and other events meets my needs and expectations.	5	4	3	2	1	0
--	---	---	---	---	---	---

Professionalism

1. The provider's personnel servicing my account meet my expectations for:						
a. competency	5	4	3	2	1	0
b. skill	5	4	3	2	1	0
c. professionalism	5	4	3	2	1	0
d. experience	5	4	3	2	1	0
e. flexibility	5	4	3	2	1	0
f. service	5	4	3	2	1	0
g. knowledge	5	4	3	2	1	0

	Very True	Mostly True	Sometimes True	Occasionally True	Rarely True	Never True
--	-----------	-------------	----------------	-------------------	-------------	------------

Communication

1. The provider's personnel servicing my account maintain sufficient contact with me so that I feel informed and served.	5	4	3	2	1	0
2. The provider's reports and correspondence are:						
a. timely	5	4	3	2	1	0
b. accurate	5	4	3	2	1	0

Flexibility

1. When my needs change, the provider's programs and services are flexible enough to adapt quickly to these changes.	5	4	3	2	1	0
2. The provider is flexible when developing new programs and services for my company.	5	4	3	2	1	0
3. The provider's personnel are flexible with respect to scheduling meetings, appointments, trainings, and other events.	5	4	3	2	1	0

Innovation

1. The provider is continuously pursuing new ways to better serve my needs, the needs of my employees, and the needs of my organization.	5	4	3	2	1	0
--	---	---	---	---	---	---

C. ANNOTATED BIBLIOGRAPHY AND RESOURCE LIST

This appendix contains a comprehensive listing of films, videotapes, books, pamphlets, packages, newsletters, posters, and other resources related to the EAP field. Each listing includes the full title of the item, date of publication, synopsis of its content, price and availability. Much of the material addresses substance abuse in the workplace. Several resources are appropriate for employee orientations and supervisor trainings. Most of the material is intended to assist in the design, implementation and evaluation of EAPs.

ANNOTATED BIBLIOGRAPHY AND RESOURCE LIST

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FILMS

TITLE Everything Looks So Normal (1983)

DETAILS 30 min., includes leaders' guide. Purchase price: \$525.00 - VHS 3/4"; \$580.00 - 16mm; Rental fee: \$135.00/3 days

SYNOPSIS Drug and alcohol use is a hidden problem in industry which affects a company's productivity, safety and ultimately the bottom line. The film explains the process of uncovering the problem by using job performance standards and referral to the Employee Assistance Program.

AVAILABLE FROM Coronet/MTI Film and Video, Inc.
420 Academy Drive, Northbrook, IL 60062
(800) 621-2131 / (708) 940-1260

TITLE Taking Action: Substance Abuse in the Workplace (1989)

DETAILS 31 min., includes 10 leader's guides/participant workbooks. Purchase Price: \$525.00; Rental fee: \$135.00/13 days

SYNOPSIS Looks at managers' and supervisors' roles in taking action against drugs in the workplace. Alerts supervisors to the signs of drug use and what to do about it. Step by step instructions on how to document job performance and confront the employee.

AVAILABLE FROM Coronet/MTI Film and Video, Inc.
420 Academy Drive, Northbrook, IL 60062
(800) 621-2131 / (708) 940-1260

TITLE Alcoholism in Industry (1976)

DETAILS 17 min., 1/2" video. Purchase price: \$250.00; Rental available.

SYNOPSIS Lecture format by Father Martin, who is known both nationally and internationally in the alcoholism/addiction field. Emphasizes information and education in treatment of alcoholics, and how alcoholism affects the cost of everything we buy.

AVAILABLE FROM FMS Productions
1029 Cindy Lane, Carpinteria, CA 93013
(800) 421-4609

FILMS

TITLE We Can Help 2000

DETAILS 18 min., 1/2" video. Purchase Price: \$350.00; Rental available.

SYNOPSIS Training for managers and supervisors. Uses role plays to demonstrate how to evaluate performance, document problems, and make referrals. Specific steps are illustrated for employee assistance intervention for problems associated with alcohol and stress.

AVAILABLE FROM FMS Productions
1029 Cindy Lane, Carpinteria, CA 93013
(800) 421-4609

TITLE Alcohol, Children & Family

DETAILS 28 min.

SYNOPSIS Recommended for colleges, health care professionals, ACA support groups, and recovery programs. Describes the effect of alcoholism on families. Begins by describing healthy families.

AVAILABLE FROM AIMS Media
6901 Woodley Ave., Van Nuys, CA 91406-2467
(800) 367-2467

TITLE The Troubled Employee (1986)

DETAILS 30 min. (union version), 23 min. (non-union version) 16mm video. Purchase price: \$520.00; Rental fee: \$140/day.

SYNOPSIS Supervisor orientation to Employee Assistance Program. Describes the cost of troubled employees to the company, how the Employee Assistance Program can help with a number of different problems. Demonstrates employee confrontation and employee referral.

AVAILABLE FROM Gerald T. Rogers Productions
5215 Old Orchard Rd. Suite 990, Skokie, IL 60077
(800) 227-9100

FILMS

TITLE Inside EAP

DETAILS 20 min. video. Purchase price: \$140.00 + 3% shipping; no rentals

SYNOPSIS Role plays demonstrating how the employee assistance program can help troubled employees, how to perform constructive confrontation. Also utilizes case study. Intended for supervisors and department heads.

AVAILABLE FROM FLI Learning Systems, Inc.
P.O. Box 2233, Princeton, NJ 08540
(609) 466-9000

TITLE Too Dangerous to Work With

DETAILS 24 min., 1/2" video. Purchase price: \$425.00; Rental available.

SYNOPSIS Opening narration by Billy Carter. Role plays demonstrate the dangers of substance abuse in a railroad yard for both users and co-workers. Denial of problems and resistance to treatment are common among users.

AVAILABLE FROM FMS Productions
1029 Cindy Lane, Carpinteria, CA 93013
(800) 421-4609

TITLE The Executive Addict (1987)

DETAILS 28 min., VHS or Beta. Purchase price: \$149.00; 3/4" - Purchase price: \$249.00; Rental fee: \$75.00.

SYNOPSIS A Phil Donahue show in talk show format, with questions and answers from the audience. Executives talk about their addictions, and a private investigator talks about his work in finding drug dealers within companies. Frank disclosures about the symptoms and problems of addiction have relevance for any substance abuser.

AVAILABLE FROM Films for the Humanities & Sciences
743 Alexander Rd. Box 2053, Princeton, NJ 08540
(609) 452-1128

FILMS

TITLE Alcohol and the Working Woman (1978)

DETAILS 24 min. video. Purchase price: \$395.00; Rental fee: \$50.00.

SYNOPSIS According to the speaker in this filmed lecture, women in the labor force have special problems with relation to alcohol and need special consideration when drawing up employee assistance programs. Working women hold two jobs and are therefore subjected to different stresses than men. Women are most often in jobs from which they gain no support. Tranquilizers are often prescribed for women and cross-addictions are common.

AVAILABLE FROM Motivational Media
6855 Santa Monica Blvd., Los Angeles, CA 90038
(213) 465-3168

TITLE Alcohol, Pills and Recovery (1978)

DETAILS 24 min. Purchase price: \$425.00; Rental fee: \$50.00.

SYNOPSIS Dr. Joseph Pursch outlines a particular perception of addiction called "sedativism." Doctors frequently prescribe sedative drugs: tranquilizers, barbiturates, etc., to help troubled people feel better. Many of these people are also using alcohol for the same reason. Cross-addiction often occurs. At first they may feel sedated, but as the effects of the drug wear off, there is a rebound effect that results in agitation, requiring further sedation. A couple, Dick and Jane, illustrate how this process happens. Their abuse of alcohol and prescribed sedative drugs leads to conflict in their marriage.

AVAILABLE FROM FMS Productions
1040 Los Palmas Ave., Los Angeles, CA 90038
(213) 461-4567

FILMS

TITLE Alcoholism as a Family Disease (1977)

DETAILS 45 min. Purchase price: \$495.00; Rental fee: \$50.00.

SYNOPSIS In this lecture, Father Martin explores how alcoholism affects the family. He believes that alcoholism is not just the sickness of the drinker, it is a family problem and all must get help together. Father Martin also gives his views on what an alcoholic is and why he or she affects the family so adversely.

AVAILABLE FROM FMS Productions
1040 Los Palmas Ave., Los Angeles, CA 90038
(609) 452-1128

TITLE Alcoholism: The Bottom Line (1976)

DETAILS 29 min. Purchase price: \$435.00; Rental fee: \$40.00.

SYNOPSIS Through a series of case studies, the effect of alcohol abuse on workers is shown. In each case there is an attempt to handle the situation and both negative and positive approaches are shown. Lorne Greene comments with statistics, and urges employers to explore employee assistance programs. He maintains that receiving help is a life-and-death matter for the employed alcoholic.

AVAILABLE FROM Motivational Media
6855 Santa Monica Blvd., Los Angeles, CA 90038
(213) 465-3168

TITLE Boozers and Users 1974

DETAILS 25 min. Purchase price: \$390.00; Rental fee: \$25.00/3 days.

SYNOPSIS The film is narrated by James Franciscus, examining society's use of a broad spectrum of drugs with the major emphasis on alcohol. The casual and excessive drinker are differentiated from the alcoholic. Warning sign of alcoholism are clearly defined.

AVAILABLE FROM Motivational Media
12001 Ventura Place # 202
Studio City, CA 91604
(613) 465-3168

FILMS

TITLE Cause the Effect/Affect the Cause (1973)

DETAILS 23 min. Purchase price: \$185.00; Rental fee: \$9.50/3 days.

SYNOPSIS Four hospital emergency staff members - a doctor, two nurses and a part-time orderly - are confronted with an intoxicated man brought in by the police. Each responds in a different manner and we are challenged to look at the attitudes and behaviors of these people. Next, the entire scene is replayed from the patient's point of view. We are then asked to assess our own attitude toward the patient and the hospital staff. Following breaks in the film for discussion, we see the events leading to the patient's appearance in the hospital. The questions asked - do we by our behavior cause the effect or affect the cause? How do the attitudes and behaviors of both parties affect the patient-staff relationship?

AVAILABLE FROM American Hospital Assn., Film Library
840 N. Lake Shore Dr., Chicago, IL 60611
(312) 645-9400

TITLE Chalk Talk (revised) (1975)

DETAILS 45 min. Purchase price: \$550.00; Rental fee: \$50.00.

SYNOPSIS A film of a lecture given by Father Joseph Martin about alcohol and alcoholism. Father Martin begins by outlining the scope of the alcohol problem and the factors influencing attitudes and behavior with respect to alcohol and alcoholism. Father Martin states that, at present, very little is known about alcohol addiction, and more knowledge is needed to provide effective treatment. Physiological effects of alcohol are described and developmental stages of alcoholism discussed. Father Martin concludes the lecture by emphasizing that to recover, an alcoholic must recognize that he or she has a drinking problem, and when he or she is ready for treatment, "what works best is AA".

AVAILABLE FROM Father Joseph Martin
8 Howard St., Aberdeen, MD 21001
(301) 272-1975

FILMS

TITLE The Dryden File II

DETAILS 24 min. video, 16mm. Purchase Price: \$495.00.

SYNOPSIS Management training. Discusses resistance and denial of drug/alcohol abuse by both employees and supervisors. Demonstrates the process of confronting an employee with problems.

AVAILABLE FROM Motivision, Ltd.
2 Beechwood Road
Hartsdale, NY 10530
(914) 684-0110

TITLE Employee Assistance Programs: A Safer Ride For All

DETAILS 14 min. videocassette

SYNOPSIS Transit systems - general information on the structure and function of EAPs and relevance for safety in transit systems. Talks about cost savings and confidentiality. Refers to performance standards (instructions for supervisors), supervisor and self-referrals, and how to select and evaluate an EAP.

AVAILABLE FROM For free brochure and information on rental contact:
Lynn Pinallo in Connecticut at (203) 566-7116 or call 1-800-527-8279 for the number in your local area. (Rural Transit Assistance Programs).

TITLE The Executive Addict (1987) (a Phil Donahue Show)

DETAILS 28 min. video

SYNOPSIS Talk show format. Prevention/Education. Executives talk about their addictions, private investigator talks about his work in finding drug dealers within companies. Questions and answers from the audience. Although the primary audience is high-power executives, the frank discussions about symptoms and problems of addiction have relevance to anyone who is a substance abuser. One on-air call from a transit system employee.

AVAILABLE FROM Films for the Humanities & Services
743 Alexander Rd. Box 2053
Princeton, NJ 08540
(609) 452-1128

VIDEOTAPE SERIES

TITLE Drugs At Work, Getting Help, and Drug Testing: Handle With Care, and Finding Solutions comprise a series of four videotapes on drug abuse in the workplace, developed by the National Institute on Drug Abuse (NIDA). These videotapes are excellent educational tools to be used in supervisor training and employee education.

DETAILS The first three videotapes are available in both employer and employee versions, and the fourth, Finding Solutions, is available in one version appropriate for employers and employees. Each videotape is approximately 20 minutes in length and is accompanied by a Facilitator's Guidebook.

SYNOPSIS *Drugs At Work* is an educational documentary which describes costs of drug use for the workplace, the individual, and the public; and examines action being taken by government and private companies. It provides information for developing effective drug abuse workplace programs through policy development, drug testing, employee assistance programs, prevention, and education. Interviews with drug users who have sought treatment and with experts on drugs in the workplace are included. Government and industry representatives describe federal and corporate programs currently underway. *Drugs At Work* is an important program for all levels in the workplace, from top management to line staff.

Getting Help presents detailed information about the use of Employee Assistance Programs (EAPs) in addressing drug use in the workplace. The film describes the value of EAPs to employees and employers through comments by business, labor, and government leaders, and EAP professionals; presentation of three model programs; and EAP client interviews. It encourages employers to consider EAPs as a tool in combatting drugs at work, and provides employees with reassuring information about the confidentiality and effectiveness of an EAP.

Drug Testing: Handle With Care describes the options available in designing a drug testing component as part of a comprehensive drug-free workplace program. Procedures addressing the needs of both the employer and the employee, to ensure the accuracy and reliability of test results, for specimen collection and laboratory analysis, and a discussion of the critical role of the Medical Review Officer (MRO) are highlighted. Case studies of public/private, unionized/non-unionized work environments with testing components are presented.

Finding Solutions portrays drug abuse in the workplace as a community-wide problem; thus the solutions offered through education and prevention are presented as personal, workplace, and community responsibilities. Specific emphasis is placed on the need to effectively deliver accurate and credible information to the workforce, to promote workplace peer involvement and build community partnerships. Alternative approaches which address drug abuse in the workplace are encouraged as primary tools for the pursuit and maintenance of personal wellness. Such approaches include stress reduction, attitudinal and behavioral change, increased self-esteem, and an increased awareness of cultural/environmental influences on these changes. While increased productivity in the workplace is cited as a major outcome of effective drug abuse prevention, this videotape emphasizes the importance of an organization's primary concern being that of its employees as persons.

***AVAILABLE
FROM***

The videotapes are available on free loan from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20852, (301) 468-2600. They are available for purchase at \$80 per videotape from National Audiovisual Center, Customer Service Section, 8700 Edgeworth Drive, Capitol Heights, MD 20743-3701, (301) 763-1896.

BOOKS

TITLE Driving Down Health Care Costs: Strategies and Solutions, 1990

PUBLISHER Panel Publishers, Inc., 1990 \$69.00
14 Plaza Rd.
Greenvale, NY 11548-9813
(516) 484-0006

SYNOPSIS Case examples illustrate the latest health care, cost-control strategies, including preferred provider organizations, wellness programs, employee assistance programs and managed care.

TITLE Designing Employee Assistance Programs, 1984

AUTHOR Dale A. Masi

PUBLISHER American Management Association \$35.00
Publications Group
135 West 50th St.
New York, NY 10020

SYNOPSIS Detailed discussion by author who is well known in the field of employee assistance programs. Discussions include setting up and evaluation of EAPs, as well as information on alcoholism, drug abuse, health promotion, women, and minorities in the workplace.

TITLE Reaching Out: A Guide to EAP Casefinding, 1982 ALMACA,
Greater Detroit Chapter

AUTHORS R. Archambault; R. Doran; T. Matlas; J. Nadolski;
D. Sutton-Wright

PUBLISHER Performance Resource Press, Inc.
155 West Big Beaver Rd.
Suite 109
Troy, MI 48084

SYNOPSIS Monograph which includes research findings on methods used to reach out and to encourage employees to use the employee assistance program. Suggestions on specific methods are included.

PAMPHLETS

TITLE "Guide for the Family of the Alcoholic"

DETAILS A 10-page pamphlet very useful for an employee assistance program.

AVAILABLE FROM Kemper Insurance Companies
Advertising Dept
Long Grove, IL 60049

TITLE "Someone Close Drinks Too Much"

DETAILS A 15-page Pamphlet

AVAILABLE FROM National Clearinghouse for Alcohol Information
Box 2345
Rockville, MD 20852

TITLE "Confidentiality of Patient Records in Alcoholism and Drug Treatment Programs"

AUTHOR Sheila B. Blume, MD

PUBLISHER National Council on Alcoholism, 1987
10 pp. Purchase Price: \$1.25; Quantity discounts.

CONTACT Publications Manager
National Council on Alcoholism
12 West 21st St.
New York, NY 10010
(212) 206-6770

SYNOPSIS Summarizes Federal regulations and general provisions regarding confidentiality of patient records.

PAMPHLETS

TITLE "Alcohol and Other Drugs: A Self-Test"

PUBLISHER Wisconsin Clearinghouse
Purchase Price: \$.15; Quantity discounts.

CONTACT Wisconsin Clearinghouse
Dept. 70
P.O. Box 1468
Madison, WI 53701

SYNOPSIS Individuals can use these questions to assess the effects of alcohol and other drugs on their lives.

PACKAGES

TITLE

Collection of concise, unique posters, pamphlets and cards that inform employees of the scope of your EAP, educate employees about potential health risks, encourage employees to self-refer, and reach out to employees families.

Pamphlet titles include:

"Just a Little Problem" - short story about coping with personal problems.

"Norman and Marge Tippler" - myths and facts concerning alcohol abuse followed by self-evaluation questionnaire.

"Fred and the Do-Gooders of the World" - cartoon presentation designed to dispel facts and fears surrounding employee use of EAP.

"The Good Life" - looks at personal finances and the stress of poor money management.

"Problems Come In Many Forms" - warm, non-threatening story about seeking help for problem drinking.

Summary cards include:

"Supervisory Summary Card" - a 2-sided review card for supervisors highlighting key do's and don't's in dealing with problem employees.

"Back to Work" - supervisor summary card - post-session reminder card about working with and motivating a returning employee.

Posters are 11" X 16", two-color, variety of messages, with a place to insert your employee assistance telephone number.

Cost:	Pamphlets	\$.37 each
	Cards	\$.20 each
	Posters	\$.95 each

CONTACT

For catalogue, contact:
FLI Learning Systems
P.O. Box 2233
Princeton, NJ 08543-2233
(609) 466-2333

PACKAGES

TITLE "Constructive Confrontation"

DETAILS Comprehensive 2-hour training session, includes 2 12-minute videos, leader's guide and optional supervisor's workbooks. Purchase Price: \$395.00 - videos and Leader's guide; \$2.50/ea. - workbooks.

SYNOPSIS Instructor leads supervisors through a series of discussions, workbook exercises, role plays and role play critiques. Video presentations depict an actual EAP training session, and separate interviews with the certified employee assistance professional conducting the session. Second video shows role plays, which trainees critique with instructor.

AVAILABLE FROM FLI Learning Systems, Inc.
P.O. Box 2233
Princeton, NJ 08543-2233
(609) 466-9000

TITLE "Constructive Confrontation Training Program"

DETAILS 2 tapes and workbook, leader's guide; 2-hour comprehensive supervisor training program includes workbook.

SYNOPSIS Leads supervisors on confronting an employee in actual training program. Videos: "Confrontation: Keeping Control"; 12 min., "Role Play Critique"; 12 1/2 min. Role play with workbook exercises on the effectiveness of the confrontation. Participants critique role-played confrontations for job performance referral. Talks primarily about the confrontation process.

AVAILABLE FROM FLI Learning Systems, Inc.
P.O. Box 2233
Princeton, NJ 08543-2233
(609) 466-9000

NEWSLETTERS

ADDRESS The U.S. Journal of Drug and Alcohol Dependence
2119-A Hollywood Boulevard
Hollywood, FL 33020

ADDRESS The Journal
Addiction Research Foundation of Ontario
33 Russell St.
Toronto, ON M5S 2S1 CANADA

POSTERS

AVAILABLE FROM EAP Posters - Free Brochure
"Motivators"
12 Pickens Lane
Weaverville, NC 28787

MISCELLANEOUS

ADDRESS National Clearinghouse for Drug Abuse Information (NCDAI)
P.O. Box 416
Kensington, MD 20795

INFORMATION Publication and film list available

ADDRESS National Coordinating Council on Drug Education
1601 Connecticut Ave. NW
Suite 301
Washington, DC 20009

INFORMATION "Drug Abuse Films", as well as critical reviews of audio-visual
productions in the area of drug education. They also publish an
annotated bibliography on materials on drug education.

MISCELLANEOUS

ADDRESS National Council on Alcoholism
Publication Division
733 3rd Avenue
New York, NY 10017

INFORMATION Books, pamphlets and audio-visual materials.

TITLE Data Management

DETAILS IBM Compatible, hard disk; Demo disk, sample reports;
Purchase Price: \$25.00.

AVAILABLE FROM Design Systems
126 Western Avenue
Suite 191
Augusta, ME 04330
(207) 621-0033

TITLE "EAP Case Tracking System"

AVAILABLE FROM Logical System Solutions, Inc.
P.O. Box 431
Croton-on-Hudson, NY 10520
1-800-421-6429

D. INVENTORY OF EXISTING PROGRAMS

This appendix contains a directory of contact people in transit systems across the United States that have had experience in the design, development and/or implementation of EAPs. The inventory was conducted to determine the existing systems, needs, and resources in small and medium-sized transit systems. This information was obtained from surveys distributed by APTA and various state transit associations that participated in the project. It was compiled to provide readers of this manual with key EAP contacts from other small and medium-sized transit systems with similar issues and concerns. Networking with other transit systems having EAPs already in place can provide companies with valuable information about what works in various settings.

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Municipality of Anchorage Transit Dept.
3650 E Tudor Road

Number of Employees: 150

Anchorage AK 99507 EAP Type: External Contractor
Phone : (907)343-4516
Contact: Pam Armstrup
Benefits Supervisor

Central Arkansas Transit Authority
408 Pyramid Place

Number of Employees: 118

2nd & Center Street
Little Rock AR 72201 EAP Type: In-House Provider
Phone : (501)375-6717
Contact: Teina Phillips
Grants and Contracts Manager

City of Glendale
5850 W. Glendale Avenue

Number of Employees: 29

Glendale AZ 85301 EAP Type: In-House Provider
Phone : (602)435-4076
Contact: Mr. Terry Neary
Human Services Director

City of Phoenix Transit System
P O Box 4275

Number of Employees: 887

Phoenix AZ 85030 EAP Type: External Contractor
Phone : (602)262-4068
Contact: Michael Payne
Benefits & Administrative Manager

Transit Management of Tucson, Inc
4220 S. Park Avenue

Number of Employees: 400

Bldg 10
Tucson AZ 85714 EAP Type: External Contractor
Phone : (602)623-4301
Contact: Kathleen Riley
Director of Personnel

Golden Empire Transit District
1830 Golden State Avenue

Number of Employees: 118

Bakersfield CA 93301 EAP Type: External Contractor
Phone : (805)324-9874
Contact: Denise Wiley
EAP Coordinator

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Central Contra Costa Transit Authority
2477 Arnold Industrial Way

Number of Employees: 93

Concord CA 94520-5327
Phone : (415)676-1976
Contact: John Aitken
Manager of Human Resources

EAP Type: External Contractor

City of Fresno/Fresno Area Express
2223 "G" Street

Number of Employees: 245

Fresno CA 93706
Phone : (204)498-1417
Contact: Dan Turner
Personnel Operations Manager

EAP Type: External Contractor

Orange County Transit District
11222 Acacia Parkway

Number of Employees: 1750

Garden Grove CA 92642-3005
Phone : (714)638-9000 X3463
Contact: Analee E. Kredel
Health and Wellness Administrator

EAP Type: External Contractor

Long Beach Transit
1300 Gardenia Avenue

Number of Employees: 600

Long Beach CA 90813
Phone : (213)591-8753
Contact: Anita McGillivray
Human Resources Assistant

EAP Type: External Contractor

Southern California Rapid Transit District
425 So. Main Street

Number of Employees: 9000

Los Angeles CA 90013
Phone : (213)972-7164
Contact: Luanna Urie
Human Resources Analyst

EAP Type: External Contractor

City of Montebello
1600 W. Beverly Boulevard

Number of Employees: 520

Montebello CA 90640
Phone : (213)887-1379
Contact: Sandra Chapek
Director of Employee Relations

EAP Type: External Contractor

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San Francisco Bay Area Rapid Transit District
800 Madison

Number of Employees: 2700

Oakland CA 94604-2688
Phone : (415)464-6203
Contact: Barbara A. George
Employee Services Administrator

EAP Type: Internal/External

South Coast Area Transit
P O Box 1146

Number of Employees: 86

Oxnard CA 93032
Phone : (805)643-3158
Contact: Melvin Chambers
Director of Administrative Services

EAP Type: External Contractor

Riverside Transit Agency
1825 Third Street

Number of Employees: 181

Riverside CA 92507
Phone : (714)684-0850
Contact: Francine Cronin
Personnel Manager

EAP Type: External Contractor

Sacramento Regional Transit District
P O Box 2110

Number of Employees: 700

Sacramento CA 95812-2110
Phone : (916)732-4718
Contact: Dan Bailey
Employee Relations Manager

EAP Type: Internal/External

San Mateo County Transit District
1250 San Carlos Avenue

Number of Employees: 500

San Carlos CA 94070-1306
Phone : (415)508-6233
Contact: Mildred Cane
Director, Human Resources

EAP Type: External Contractor

Golden Gate Bridge Highway and Transportation District
P O Box 9000, Presido Station

Number of Employees: 960

San Francisco CA 94129
Phone : (415)257-4528
Contact: Betti Conder
Employee Benefits Coordinator

EAP Type: External Contractor

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Santa Clara County Transportation Agency/Transit District
1555 Berger Drive
Number of Employees: 2500
San Jose CA 95112 EAP Type: In-House Provider
Phone : (408)241-7772
Contact: Dave Hanner
EAP Coordinator

Santa Barbara Metropolitan Transit District
550 E. Cota Street
Number of Employees: 160
Santa Barbara CA 93103 EAP Type: External Contractor
Phone : (805)963-3364
Contact: Sherrie Fisher
Assistant General Manager

Santa Cruz Metropolitan Transit District
230 Walnut Avenue
Number of Employees: 315
Santa Cruz CA 95060 EAP Type: External Contractor
Phone : (408)423-5582
Contact: Paul Chandley
Human Resources Manager

City of Santa Monica
1685 Main Street
Number of Employees: 1300
Santa Monica CA 90401 EAP Type: External Contractor
Phone : (213)458-2234
Contact: Martha Zamora
Employee Benefits Technician

Roaring Fork Transit Agency
0051 Service Center Road
Number of Employees: 65
Aspen CO 81611 EAP Type: External Contractor
Phone : (303)920-5240
Contact: Cheryl Cumnock
Pitkin County Personnel Director

Regional Transportation District
1600 Blake Street
Number of Employees: 1850
Denver CO 80202 EAP Type: External Contractor
Phone : (303)299-2356
Contact: Carla Elam-Floyd
Manager, Human Resources Support

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Fort Collins/Transfort
P O Box 580
Number of Employees: 800
Fort Collins CO 80522
EAP Type: External Contractor
Phone : (303)221-6620
Contact: Ken Sylvester
Transfort Director

Connecticut Transit
P O Box 66
Number of Employees: 800
Hartford CT 06141
EAP Type: External Contractor
Phone : (203)522-8101
Contact: David Lee
Assistant General Manager-Transit Services

Washington Metropolitan Area Transit Authority
600 Fifth Street N.W.
Number of Employees: 10701
Washington DC 20001
EAP Type: In-House Provider
Phone : (202)962-2270
Contact: Carmen Thorne
Manager, Employee Relations

Space Coast Area Transit
2575 St Johns Street
Number of Employees: 50
B-230
Melbourne FL 32940
EAP Type: External Contractor
Phone : (407)633-2019
Contact: Perry Maul
Transit Director

Escambia County Transit System
1515 West Fairfield
Number of Employees: 70
Pensacola FL 32504
EAP Type: External Contractor
Phone : (904)436-9386
Contact: Ken Westbrook
Resident Manager

Sarasota County Area Transit
5303 Pinkey Avenue
Number of Employees: 67
Sarasota FL 34233
EAP Type: External Contractor
Phone : (813)951-5261
Contact: H. Skeet Surrency
Sarasota County Personnel Director

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Hartline
4305 E. 21st Avenue
Number of Employees: 399
Tampa FL 33605
EAP Type: External Contractor
Phone : (813)623-5835
Contact: Irma Capaz
Personnel Manager

Athens Transit System
325 Pound Street
Number of Employees: 40
Athens GA 30601
EAP Type: External Contractor
Phone : (404)357-6080
Contact: Barbara Riley
Assisant Director of Personnel

Metropolitan Atlanta Rapid Transit Authority (MARTA)
2424 Piedmont Road
Number of Employees: 3700
Atlanta GA 30324
EAP Type: In-House Provider
Phone : (404)848-5355
Contact: Dennis Buttimer
Employee Assistance Administrator

County of Hawaii, Mass Transportation Agency
25 Aupuni Street
Number of Employees: 5
Hilo HI 96720
EAP Type: External Contractor
Phone : (808)961-8343
Contact: Steven Shinchi
Transit Operations Administrator

City of Iowa City
410 E. Washington Street
Number of Employees: 480
Iowa City IA 52240-1826
EAP Type: External Contractor
Phone : (319)356-5026
Contact: Sylvia Mejia
Personnel Administrator

Chicago Transit Authority
Merchandise Mart Plaza
Number of Employees: 13000
Room 781
Chicago IL 60654
EAP Type: In-House Provider
Phone : (312)222-6114
Contact: Michael Stroden
Employee Assistance Program Director

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Greater Peoria Mass Transit District
2105 N E Jefferson
Number of Employees: 120
Peoria IL 61603
EAP Type: External Contractor
Phone : (309)676-4040
Contact: Gregory E. Leslie
Assistant Manager

Rock Island County Metropolitan Mass Transit District
2929 5th Avenue
Number of Employees: 85
Rock Island IL 61201
EAP Type: External Contractor
Phone : (309)788-3360
Contact: Jeffery Nelson
General Manager

Rockford Mass Transit District, Inc.
520 Mulberry Street
Number of Employees: 77
Rockford IL 61101-1016
EAP Type: External Contractor
Phone : (815)961-2230
Contact: Steven A. Urbelis
Executive Director

Springfield Mass Transit District
928 South Ninth
Number of Employees: 86
Springfield IL 62703
EAP Type: External Contractor
Phone : (217)522-6087
Contact: Linda F. Tisdale
Assistant Managing Director

Gary Public Transportation Corporation
100 West 4th Avenue
Number of Employees: 105
P O B M857
Gary IN 46401-0857
EAP Type: External Contractor
Phone : (219)885-7555
Contact: Charlotte Rowan
Human Resources Manager/EAP Administrator

Muncie Indiana Transit System
1300 E. Seymour Street
Number of Employees: 70
Muncie IN 47302
EAP Type: External Contractor
Phone : (317)282-2762
Contact: Kevin Barton
Director of Operations

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South Bend Public Transportation Corporation 901 E. Northside Boulevard		Number of Employees:	114
South Bend Phone : (219)232-9901 Contact: Matilda Crowell Administrative Assistant	IN 46624-1437	EAP Type:	External Contractor
Kosciusko Area Bus Service 1804 E. Winona Avenue		Number of Employees:	22
Warsaw Phone : (219)267-4990 Contact: Gretchen Sons Transportation Coordinator	IN 46580	EAP Type:	External Contractor
Topeka Metropolitan Transit Authority 201 No. Kansas Avenue		Number of Employees:	60
Topeka Phone : (913)233-2011 Contact: Tom Greene Transit Operations Manager	KS 66617	EAP Type:	External Contractor
Transit Authority of Lexington, KY (Lex Tran) 109 West Loudon Avenue		Number of Employees:	91
Lexington Phone : (606)255-7756 Contact: Geri Davidson Director of Finance	KY 40508	EAP Type:	External Contractor
Transit Authority of River City (TARC) 1000 West Broadway		Number of Employees:	697
Louisville Phone : (502)561-5140 Contact: Joyce Babb Personnel Administrator	KY 40203	EAP Type:	External Contractor
City of Owensboro Transit System Box 847		Number of Employees:	20
Owensboro Phone : (502)685-8279 Contact: Alma Randolph Employee Relations	KY 42302	EAP Type:	External Contractor

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Transit Management of Southeast Louisiana, Inc.
101 Dauphine at Canal

Number of Employees: 1350

New Orleans LA 70112-3125
Phone : (504) 569-2732
Contact: Ms. Phyllis Nabonne
Supervisor of Employment

EAP Type: External Contractor

Massachusetts Bay Transportation Authority
120 Boylston Street

Number of Employees: 7000

Boston MA 02116
Phone : (617)722-5381
Contact: Cynthia Gallo
Manager, Employee Counseling Services

EAP Type: In-House Provider

Greenfield Montague Transportation Area
382 Deerfield Street

Number of Employees: 38

Greenfield MA 01301
Phone : (413)774-5195
Contact: Thomas Chilik
General Manager

EAP Type: External Contractor

Ann Arbor Transportation Authority
2700 S. Industrial

Number of Employees: 170

Ann Arbor MI 48104
Phone : (313)677-3929
Contact: Bob Potts
Manager of Human Services

EAP Type: External Contractor

Battle Creek Transit
75 Beacon Street
P O Box 1717

Number of Employees: 40

Battle Creek MI 49016
Phone : (616)966-3474
Contact: James D. Walker
Transit Manager

EAP Type: External Contractor

Suburban Mobility Authority for Regional Transportation (SMART)
660 Woodward Avenue

Number of Employees: 870

Detroit MI 48226
Phone : (313)256-8730
Contact: Walter H. Redmond
Manager, Employee Programs

EAP Type: External Contractor

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Mass Transportation Authority
1401 South Dort Highway
Number of Employees: 147
Flint MI 48503
EAP Type: External Contractor
Phone : (313)767-6950
Contact: De Anna Thompson
Director of Personnel

UDAC, Inc
500 East 10th Street
Number of Employees: 51
Duluth MN 55805
EAP Type: External Contractor
Phone : (218)722-5867
Contact: Ludwig Petrich
Facility and Transportation Manager

City of Red Wing
P O Box 34
Number of Employees: 5
Red Wing MN 55066
EAP Type: External Contractor
Phone : (612)388-6796
Contact: Ronald Bulholz
Public Service Director

West Central Community Services Center, Inc
P O Box 787
Number of Employees: 125
Willmar MN 56201
EAP Type: In-House Provider
Phone : (612)235-4613
Contact: Ken Wilson
Employee Assistance Program

Kansas City Area Transportation Authority
1350 E. 17th Street
Number of Employees: 800
Kansas City MO 64108
EAP Type: External Contractor
Phone : (816)346-0204
Contact: Joseph L. Jones III
Director of Personnel

City of Billings MET Transit
P O Box 1178
Number of Employees: 35
Billings MT 59103
EAP Type: External Contractor
Phone : (406)657-8204
Contact: Carlene Deveau
Personnel Director

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Charlotte Transit System
901 N. Davidson Street

Number of Employees: 325

Charlotte NC 28206 EAP Type: External Contractor
Phone : (704)336-2420
Contact: Rebecca P. Cherry
Director of Administration/Safety

New Jersey Transit EAP
76 South Orange Avenue

Number of Employees: 9500

Suite 211
South Orange NJ 07079 EAP Type: In-House Provider
Phone : (201)763-3910
Contact: James J. Hutchinson, ACSW
Employee Assistance Program Director

Regional Transportation Commission/Citifare
2050 Villanova Drive

Number of Employees: 230

Reno NV 89502 EAP Type: External Contractor
Phone : (702)323-2800 x128
Contact: Sue Utterback
Human Resources Analyst

Capitol District Transportation Authority
110 Watervliet Avenue

Number of Employees: 500

Albany NY 12206 EAP Type: Consortium
Phone : (518)482-7286
Contact: Edward Guire
Director of Human Resources

New York City Transit Authority
370 Jay Street

Number of Employees: 53000

Room 602
Brooklyn NY 11201 EAP Type: In-House Provider
Phone : (718)852-0529/0632
Contact: Dr. V. Michael McKenzie
Clinical Director

Niagara Frontier Transportation Authority
181 Elliott Street

Number of Employees: 1500

Buffalo NY 14203 EAP Type: In-House Provider
Phone : (716)854-1775
Contact: James A. Bryant, Jr. CEAP
EAP Manager

Metropolitan Suburban Bus Authority
700 Commercial Avenue
Number of Employees: 881
Garden City NY 11530
EAP Type: External Contractor
Phone : (516)542-0100 ext418
Contact: Margaret Fraser, RN
Staff Nurse/EAP Coordinator

City of Ithaca
108 East Green Street
Number of Employees: 452
Ithaca NY 14850
EAP Type: External Contractor
Phone : (607)274-6539
Contact: Valerie W. Saul
Personnel Administrator

Long Island Rail Road Company
Jamaica Station
Number of Employees: 7400
Jamaica NY 11435
EAP Type: In-House Provider
Phone : (718)990-7577
Contact: Ben LoCasto
Manager-Employee Assistant Unit

Metropolitan Transportation Authority
347 Madison Avenue
Number of Employees: 607
New York NY 10017
EAP Type: In-House Provider
Phone : (212)878-7407
Contact: David Knapp
Director of Human Resources

Regional Transit Service
1372 East Main Street
Number of Employees: 520
Rochester NY 14609
EAP Type: External Contractor
Phone : (716)654-0250
Contact: Ellen R. Cicero
Director of Human Resources

Broome County Public Transportation Department
413 Old Mill Road
Number of Employees: 110
Vestal NY 13850
EAP Type: External Contractor
Phone : (607)763-4464
Contact: Richard Beam
Commissioner

Metro Regional Transit Authority
416 Kenmore Boulevard
Akron OH 44311
Phone : (216)762-7267
Contact: John W. Wilson
Director of Human Resources

Number of Employees: 277
EAP Type: External Contractor

Sorta/The Metro
1014 Vine Street
Suite 2000
Cincinnati OH 45202-1122
Phone : (513)632-7558
Contact: Janice Smith
Supervisor of Employment

Number of Employees: 890
EAP Type: External Contractor

Greater Cleveland Regional Transit Authority
615 Superior Avenue N.W.
Cleveland OH 44113
Phone : (216)566-5013
Contact: Irene Shapiro
Director of Compensation and Benefits

Number of Employees: 3000
EAP Type: External Contractor

Central Ohio Transit Authority
1600 McKinley Avenue
Columbus OH 43222
Phone : (614)275-5800
Contact: Barbara England
Director of Human Resources

Number of Employees: 695
EAP Type: External Contractor

Miami Valley Regional Transit Authority
600 Longworth
Dayton OH 45401
Phone : (513)443-3006
Contact: Wendy Warner
Manager Employment Services

Number of Employees: 650
EAP Type: External Contractor

Middletown Transit System
One City Centre Plaza
Middletown OH 45042
Phone : (513)425-7835
Contact: Dave Schul
Director of Employee Relations

Number of Employees: 14
EAP Type: External Contractor

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Toledo Area Regional Transit Authority P O Box 792		Number of Employees:	370
Toledo Phone : (419)245-5221 Contact: Laura Koss Director of Personnel and Claims	OH 43695	EAP Type:	External Contractor
<hr/>			
Metropolitan Tulsa Transit Authority P O Box 52488		Number of Employees:	165
Tulsa Phone : (918)585-1195 Contact: Jimmie Lou Tarpley Assistant General Manager	OK 74152	EAP Type:	External Contractor
<hr/>			
Lane Transit Authority P O Box 7070		Number of Employees:	230
Eugene Phone : (503)741-6182 Contact: Bill Nevell Personnel Administrator	OR 97401-0470	EAP Type:	External Contractor
<hr/>			
Altoona Metro Transit (AMTRAN) 3301 Fifth Avenue		Number of Employees:	48
Altoona Phone : (814)944-4074 Contact: Carleen Illig Dispatcher/Supervisor	PA 16602	EAP Type:	External Contractor
<hr/>			
Cambria County Transit Authority 726 Central Avenue		Number of Employees:	100
Johnstown Phone : (814)535-5526 Contact: Michael R. Noel Assistant General Manager	PA 15902-2996	EAP Type:	External Contractor
<hr/>			
Port Authority of Allegheny County 2235 Beaver Avenue		Number of Employees:	3000
Pittsburgh Phone : (412)237-7385 Contact: Ronald Willard, MSW, CEAP Employee Assistance Program Coordinator	PA 15233-1080	EAP Type:	Internal/External

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Community Transit Inc
P O Box 3446
Number of Employees: 95

York PA 17402
EAP Type: External Contractor
Phone : (717)846-1479
Contact: Sandra Anderson
Safety and Training Manager

Greenville Transit Authority
P O Drawer 1568
Number of Employees: 110

Greenville SC 29602
EAP Type: External Contractor
Phone : (803)271-9228
Contact: Terri Hooper
Administrative Assistant

Clarksville Transit System
430 Boillin Lane
Number of Employees: 38

Clarksville TN 37040
EAP Type: External Contractor
Phone : (615)553-2430
Contact: Jim Smith
Director

Midsouth Transportation Management, Inc
1370 Levee Road
Number of Employees: 423

Memphis TN 38108
EAP Type: External Contractor
Phone : (901)722-7136
Contact: Onita Jamieson
Employee Benefits Administrator

Brazos Transit Systems
504 East 27th Street
Number of Employees: 100

Bryan TX 77803
EAP Type: External Contractor
Phone : (409)779-7443
Contact: John McBeth
Administrator

Corpus Christi Regional Transportation Authority
P O Box 23040
Number of Employees: 180

Corpus Christi TX 78403
EAP Type: External Contractor
Phone : (512)883-2287
Contact: Sylvia Mendez
Human Resource Assistant

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Dallas Area Rapid Transit
601 Pacific Avenue

Number of Employees: 1965

Dallas TX 75202 EAP Type: External Contractor
Phone : (214)573-8557
Contact: Linda Williams
Employee Programs Administrator

Fort Worth Transportation Authority (The T)
P O Box 1477

Number of Employees: 380

Fort Worth TX 76101 EAP Type: External Contractor
Phone : (817)871-6295
Contact: Ruth Lyon
Personnel Supervisor

Utah Transit Authority
P O Box 30810

Number of Employees: 1000

Salt Lake City UT 84130-0810 EAP Type: External Contractor
Phone : (801)262-5626
Contact: Karen Racimer
Human Resource Specialist

Blacksburg Transit
300 South Main Street

Number of Employees: 114

Blacksburg VA 24060 EAP Type: External Contractor
Phone : (703)961-1188
Contact: Karen Edmonds
Personnel Technician

City of Danville Transit System
P O Box 3300

Number of Employees: 19

Danville VA 24543 EAP Type: External Contractor
Phone : (804)799-5245
Contact: David T. Monacelli
Fleet Management Division Director

Tidewater Transportation District Commission
P O Box 2096

Number of Employees: 600

Norfolk VA 23501 EAP Type: External Contractor
Phone : (804)627-9291
Contact: Linda Tucker
TTDC Human Resources Manager

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Petersburg Area Transit
309 Fairgrounds Road
Number of Employees: 27

Petersburg VA 23802
Phone : (804)733-2324
Contact: M. Angela White
Personnel Director
EAP Type: External Contractor

Greater Richmond Transit Company
101 S. Davis Avenue
Number of Employees: 429

Richmond VA 23220
Phone : (804)358-3871 Ext 48
Contact: Jeffery Cahoon
Director of Human Resources
EAP Type: Consortium

Greater Roanoke Transit Company
P O Box 13247
Number of Employees: 80

Roanoke VA 24012
Phone : (703)982-0305
Contact: Kathryn Pruitt
Assistant General Manager
EAP Type: External Contractor

Whatcom Transportation Authority
2200 Nevada Street
Number of Employees: 70

Bellingham WA 98226
Phone : (206)676-6843
Contact: Kara Hart
Personnel Specialist
EAP Type: External Contractor

Kitsap Transit
234 S Wycoff Street
Number of Employees: 112

Bremerton WA 98312
Phone : (206)478-6234
Contact: Claudette Dietlin
Personnel Analyst
EAP Type: External Contractor

City of Everett
3002 Wetmare
Number of Employees: 900

Everett WA 98204
Phone : (206)259-8767
Contact: Rachel Harris
Administrative Assistant/Personnel
EAP Type: External Contractor

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Community Transit
8905 Airport Road
Number of Employees: 281

Everett WA 98204 EAP Type: External Contractor
Phone : (206)348-7105
Contact: Susan Pineda
Director of Human Resources

Intercity Transit
P O Box 659
Number of Employees: 160

Olympia WA 98507 EAP Type: External Contractor
Phone : (206)786-8585
Contact: Melody Johnson
Human Resources Manager

Jefferson Transit Authority
1615 West Sims Way
Number of Employees: 22

Port Townsend WA 98368 EAP Type: External Contractor
Phone : (206)385-4777
Contact: Melanie Bozak
Finance/Administration Supervisor

Ben Franklin Transit
1000 Columbia Drive S.E.
Number of Employees: 150

Richland WA 99352 EAP Type: External Contractor
Phone : (509)735-4131
Contact: April Collett
Human Resources Manager

Municipality of Metropolitan Seattle
821 2nd Avenue MS 103
Number of Employees: 4300

Seattle WA 98104 EAP Type: In-House Provider
Phone : (206)684-1213
Contact: Pam Salisbury
Supervisor

Spokane Transit Authority
West 1230 Boone Avenue
Number of Employees: 417

Spokane WA 99201 EAP Type: External Contractor
Phone : (509)325-6000 Ext183
Contact: Gary Hunt
Personnel Manager

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Pierce Transit
P O Box 99070
Number of Employees: 530

Tacoma WA 98499
EAP Type: External Contractor
Phone : (206)581-8095
Contact: Nikki Barnard
Director of Human Resources

Clark County Public Transit Benefit Area Authority (dba-C-Tran)
P O Box 2529
Number of Employees: 175

Vancouver WA 98668-2529
EAP Type: External Contractor
Phone : (206)696-4494
Contact: Arlene Doern
Personnel & Risk Manager

Madison Metro Transit
1101 East Washington Avenue
Number of Employees: 350

Madison WI 53703
EAP Type: External Contractor
Phone : (608)266-6594
Contact: Richard Buss
Cheif of Transit Operations

Milwaukee County Transit System
1942 North 17th Street
Number of Employees: 1500

Milwaukee WI 53205
EAP Type: External Contractor
Phone : (414)937-3270
Contact: Kelly Jaynes
Manager of Employee Benefits

Waukesha Transit System Utility
201 Delafield Street
Number of Employees: 37

Room 200
Waukesha WI 53188-3643
EAP Type: External Contractor
Phone : (414)524-3594
Contact: Robert Johnson
Transit Coordinator

Kanawha Valley Regional Transportation Authority
P O Box 1188
Number of Employees: 165

Charleston WV 25324
EAP Type: External Contractor
Phone : (304)343-3840
Contact: J. Douglas Hartley
Director of Special Services & Marketing

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Calgary Transit (166 VP)
County of Calgary, Calgary, Alberta
P O Box 2100, Station M
Calgary AL T2P 2M5 CANADA
Phone : (403)268-1679
Contact: Gary Delaney
Employee Assistance Counselor

Number of Employees: 1800
EAP Type: In-House Provider

Societe De Transport De La Communaute
Urbaine De Montreal
8635 Boulevard St Laurent
Montreal MT H2P 2M9 CANADA
Phone : (514)280-5232
Contact: Robert Pilotte
Chef De Section-PAE

Number of Employees: 8000
EAP Type: In-House Provider

Go Transit
1120 Finch Avenue
Downsview ON M3J 3J8 CANADA
Phone : (416)665-9211
Contact: Maryanne Pankin
Head, Human Resources Services

Number of Employees: 1200
EAP Type: External Contractor

Ottawa-Carlton Regional Transportation Commission
1500 St Laurent Boulevard
Ottawa, Ontario ON K1G 0Z8 CANADA
Phone : (613)748-4473
Contact: Mr. Gilles Guay
Coordinator EAP

Number of Employees: 2400
EAP Type: In-House Provider

Toronto Transit Commission
1900 Yonge Street
Toronto ON M4S 1Z2 CANADA
Phone : (416) 393-4356
Contact: R. J. Thacker
Manager - Employee Relations

Number of Employees: 10000
EAP Type: Joint Union/Mgmt Adm

STO (Societe De Transport De L'Outaouais)
111, rue Jean-Proulx
Hull, Quebec QU J8Z 1T4 CANADA
Phone : (514)385-5214
Contact: LaLonde Leo
Directeur General

Number of Employees: 410
EAP Type: External Contractor

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